# Department of Public Safety & Corrections State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC SECRETARY



March 17, 2023

### MEMORANDUM

TO:

The Honorable Scott Mathews

Sheriff of West Carroll Parish

FROM:

ames M. Le Blanc

Secretary

RE:

"Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) recertification inspection that was conducted at West Carroll Parish Jail on December 7, 2022. At this time DPS&C is recertifying this facility in compliance with the Basic Jail Guidelines" with annual monitoring.

The inspection report indicates this facility was 35% over operational capacity due to recent arrest. However, on March 6, 2023, the BJG Team Leader verified inmate count at West Carroll Parish Jail. Total count was 25, which is not over capacity. Please keep in mind, DPS&C encourages compliance with BJG I-C-006 "Operational Capacity", as noted in the Fire Marshal report.

Congratulations to you and your staff on this accomplishment and thank you for your hard work and dedication that are necessary to achieve this goal.

JML/mwk

### Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Danny Frazier, West Carroll Parish Jail Seth Smith, Chief of Operations Jerry Goodwin, Warden, DWCC James Arnold, BJG Team Leader

P.O. Box 94304 + Baton Rouge, Louisiana 70804 + (225) 342-6740 + Fax (225) 342-3095 + www.doc.la.gov



Department of Public Safety and Corrections

By the authority vested in me, under Chapter 9, Title 36 of the Louisiana Revised Statutes, I, James M. Le Blanc, Secretary, do hereby recognize

# West Carroll Parish Jail in acknowledgement of

Continued Compliance with the Basic Jail Guidelines Process

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

this _	$29^{th}$	day of	March
in the	year of our Lord	2023 and of	





## **BJG RECERTIFICATION REPORT**

Rev. 07/29/2022 mwk

Facility Name:

West Carroll Parish Jail

**BJG Team Leader & Monitors:** 

Colonel James Arnold, BJG Team Leader

Facility Warden & Email Address: Warden Danny Frazier, Warden@westcarrollsheriff.net

Facility Staff:

Warden Danny Frazier

BJG Inspection Date:

December 7, 2022

Previous BJG Inspection Date:

December 18, 2019

Operational Capacity:

26

Count on Day of Visit:

35

Please see attached Excel Spreadsheet for each area reviewed for BJG compliance.

Concerns or Issues from the previous BJG Monitoring Inspection: None

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	15	0	15
Number of Local Offenders	20	0	20
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	35	0	35

### Number of DOC Offenders that are:

Single Bunked	0
Double Bunked	15
Triple Bunked	0
Total	15

### 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
Jan-2022	0	0	0	0
Feb-2022	0	0	0	0
March-2022	0	0	0	0
April-2022	0	0	0	0
May-2022	1	0	0	0
June-2022	1	0	0	0
July-2022	0	0	0	0
Aug-2022	1	0	0	0
Sept-2022	1	0	0	0
Oct-2022	0	0	0	0
Nov-2022	0	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
Jan-2022	0	0	0	0	Cigs,tobacco
Feb-2022	0	0	0	0	0
March-2022	0	0	0	0	0
April-2022	0	0	0	0	lighter
May-2022	0	0	0	0	Cigs, pills
June-2022	0	0	0	0	0
July-2022	0	0	0	0	0
Aug-2022	0	0	0	0	Cigs, lighters
Sept-2022	0	0	0	0	Nail clippers
Oct-2022	1	0	0	0	Tobacco,lighters
Nov-2022	0	0	0	0	0
<del>-</del>	-				

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

Living Area: Living areas were found to be clean and orderly during the inspection.

- Dorms See below
- Cell Block DOC offenders are housed in a cellblock setting. There are no open dorms at the jail.
   Cells were inspected and found to be clean and clutter free. Bulletin board are posted in common area which includes information on PREA and the facility rules and notices.

### **Culinary/Dining:**

Breakfast and Dinner are provided by the Bakery Barn restaurant in Oak Grove, Louisiana. Sandwiches and chips are provided for the lunch meal.

### Bathrooms:

Bathrooms were inspected and found to be in good working order.

### Yard Areas:

Yard area is clutter free and well maintained. DOC offenders receives yard time at least 3 times a week with weather permitting.

### Maintenance:

There is no maintenance department within the secure perimeter of the facility. Any needed maintenance is provided by the police jury from outside source.

### II-A-007 COUNTS:

- How many formal counts are conducted each shift? 3 on day shift and 3 on night shift
- How many counts are conducted each day?

### Stick outs counts

- How does the facility accomplish this? Staff conducts visual counts according to policy.
- Does this process insure accountability and safe/secure operation of the facility? YES

### II-A-012 CLASSIFICATION SYSTEM:

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

If yes,

- What is their classification process to determine who is eligible for trustee status?
   Offenders are screened using an objective classification process which meets the guidelines as required.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes, the facility classification process uses the same as DPS&C. Facility is utilizing the appropriate forms.

II-A-018 OFFENDER DRUG TESTING: (Please list monthly since the previous BJG monitoring visit.)

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
Jan-2022	10	17	59%	1-THC
Feb-2022	12	17	70%	0
March-2022	10	16	63%	Ö
April-2022	6	16	38%	0
May-2022	10	15	67%	0
June-2022	10	17	59%	0
July-2022	4	17	24%	0
Aug-2022	4	17	24%	0
Sept-2022	5	17	29%	0
Oct-2022	4	16	25%	0
Nov-2022	5	15	33%	0

### III-A-0010 RULES AND DISCIPLINE:

- 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?
   Offender forwards paperwork to the Warden for his review and then forwarded to DWCC.
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? YES

### VII-B-010 BJG AUTOMATED MONTHLY REPORTING REVIEW:

- Has the facility been inputting the correct info timely? YES
- Does the reported info suggest any issues of concern or improvement? No

### V-B-002 EDUCATIONAL PROGRAMING:

### **GED Program**

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

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

### LIST ALL OTHER OFFENDER PROGRAMS:

Religious Programs

### VI-B-002 GRIEVANCE PROCESS:

- Does grievance process include two levels of review? Yes
- Who are the designees at each level? 1st level Warden, 2nd level Sheriff
- What is the specified time period for response at each level? 1<sup>st</sup> level 15 days, 2<sup>nd</sup> level 25 days

### PREA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? (Yes or No) NO
- Is this facility PREA compliant? (Yes or No) N/A
  - 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

### OTHER:

**STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS**: Staff morale was observed to be good. Staff were knowledgeable in their job duties. Throughout the inspection all staff members were very professional an eager to assist with the inspection as needed.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE: Offender's morale and quality of life is deemed as good. I spoke with all of the DOC offenders that were present and none voiced any complaints. Offenders were aware of how to file grievance and access sick call procedures. There were no complaints regarding the quality/quantity of meals.

**RECOMMENDATION**: Warden Frazier and his staff are committed to working with DPS&C to continually improve the quality of life for all offenders in their custody.

Based on my walk through of this facility and review of the BJG files, it is recommended that West Carroll Parish Jail receive full recertification with annual monitoring.



Facility: West Carroll Parish Jail Date Conducted: December 7, 2022

Monitors: Colonel James Arnold, BJG Team Leader

BASIC JAIL	GUIDELINES (BJG)	
PART I - SAFETY		
A. PROTECTION FROM INJURY AND ILLNESS		
References: ACA CJS 1-1A-01, 1-1A-02, 1-1A-03, 1-	Findings	Response
1A-04, 1-1A-05, 1-1C-05, 1-4A-03, 1-4A-04		Kesponse
I-A-001 Safety/Sanitation/Inspections The facility complies with all applicable laws and regulations of the State Sanitation Officer and the State Fire Marshal. The following inspections are implemented:  •Weekly sanitation inspections of all facility areas by a qualified departmental staff member.  •Weekly inspections of all food service areas, including dining and food preparation areas and equipment.  •Water temperature in housing areas is checked and recorded daily.  •Comprehensive and thorough monthly inspections by a safety/sanitation specialist for compliance with sanitation, safety and fire prevention standards.  •At least annual inspections by the State Sanitation Officer and the State Fire Marshal.	Compliant. Facility conducted weekly and monthly inspections. Water temperatures are recorded daily. Last Fire Marshal report 6/9/22, last DHH incarceration and retail food 7/5/22 on file.	
Visual Inspection: completed inspection checklists and reports, documentation of corrective action, inspection reports		
I-A-002 Disposal of Materials Disposal of liquid, solid, and hazardous material complies with applicable government regulations. Visual Inspection: trash disposal contract, completed inspection reports, include documentation that deficiencies were corrected	Compliant. Trash pick up is provided by the Town of Oak Grove.	
I-A-003 Vermin and Pests  Vermin and pests are controlled. There is a written and implemented plan for the control of vermin and pests.  Visual Inspection: pest control contracts, trash disposal contracts, inspection reports	Compliant. A contract is on file with Terminix Pest Control and receipts of service.	
The facility is clean and in good repair. There is a written housekeeping plan that provides for the ongoing cleanliness visual Inspection: inspection reports, completed forms. documentation of correction of identified I-A-005 Water Supply  The facility's potable water source and supply is certified at least annually by an independent, outside source to be in compliance with the State Sanitary Code. The facility complies with the requirements of the state health officer. There is a specific plan for addressing deficiencies, if any, that is approved by the state health officer.  Visual Inspection: documentation of approval by DHH or local authority, plan for addressing deficiencies	Compliant. Facility was clean and odor free.  Compliant. Water is supplied through the Town Of Oak Grove.	



References: Dept. Reg. C-03-003/OP-A-3	Findings	Response
I-B-001 Offender Transport Escorted and unescorted absences of state offenders are governed by R.S. 15:811 and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."  Visual Inspection: documentation of staff training, documentation of medical, funeral, etc. (outside trips)	Compliant. Documentation of medical and court trips on file.	, coponida
C. EMERGENCY PREPAREDNESS/RESPONSE		
References: ACA CJS 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-7E-01, Dept. Regs. A-04-002/PS-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-05-001/AM-I-4		Response
I-C-001 Emergency Plan There is a written plan, submitted to the Secretary of DPS&C, that specify the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of hostages, and natural or man-made disasters. These plans are made available to all applicable personnel and are reviewed annually and updated as needed. All facility personnel are trained annually in the implementation of the emergency plan.  An evacuation plan is used in the event of fire or major emergency. The plan is approved by the state fire marshal, reviewed annually, and updated, if necessary.  There are written procedures for significant unusual occurrences or facility emergencies including but not limited to natural or man-made disasters; major disturbances such  Visual Inspection: training records, facility logs, documentation of approval of plan, documentation of annual review, documentation of staff receipt, training on the plan	Compliant. Facility emergency plan is on file and approved by the fire marshal. Documentation of staff training is on file.	
	Findings	Response
I-C-002 Immediate Release of Offenders There is a means for the immediate release of inmates from locked areas in case of emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of offenders and staff in the event of fire or other emergency.		
Visual Inspection: facility records/logs		
I-C-003 Fire Safety/Code Conformance The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the State Fire Marshal. The State Fire Marshal approves any variances, exceptions, or equivalencies.  Visual Inspection: documentation of fire alarm and	Compliant. Most recent fire marshal report was on 6/9/22 with no deficiencies noted.	
detection system maintenance and testing, plans for addressing deficiencies		



I-C-004 Facility Furnishings Facility furnishings meet fire-safety-performance requirements.  Visual Inspection: Specifications for all furnishings.	Compliant. Specifications of all furnishing meets fire safety requirements.	
I-C-005 Flammable, Caustic and Toxic Materials Written policy, procedure and practice govern the control and use of all flammable, toxic and caustic materials. Visual Inspection: Staff training records, offender training records, internal inspection reports. Documentation of incidents that involved FTC materials. Inventories.	Compliant. Written policy and procedures are in place. Inventories and checkout system are in place for all flammable, toxic and caustic materials.	
I-C-006 Operational Capacity	Operational capacity is 26. Day of	Facility was over by 9
The number of offenders present does not exceed the	inspection total count was 35 with	due to recent arrest.
operational capacity as determined by the state fire marshal and state health officer.	15 of the 35 being DOC offenders.	
The state fire marshal will determine a capacity primarily		
based upon exiting capabilities. The state health officer will		
determine a capacity based upon the ratio of plumbing		
fixtures to offenders and square footage. The operational		
capacity will be the lower of these two figures.		
Visual Inspection: facility count sheets		

PART II - SECURITY		
A. PROTECTION FROM HARM		
References: ACA CJS 1-2A-01, 1-2A-04, 1-2A-05, 1-2A-06, 1-2A-08, 1-2A-11, 1-2A-13, 1-2A-14, 1-2A-16, 1-2A-17, 1-2A-19, 1-2A-20, Dept. Regs. A-02-008/AM-F-47, B-02-001/IS-B-1, C-02-007/OP-C-3	Findings	Response
II-A-001 Control There is 24-hour monitoring and coordinating of the facility's security, life safety, and communications systems.  Visual Inspection: facility records/logs, maintenance records, records of staff deployment	Compliant. Facility has camera system in place. Logs of staff schedules on file.	
II-A-002 Secure Perimeter  The facility's perimeter is controlled by appropriate means to ensure that offenders are secured remain within the perimeter and that access by the general public is denied without proper authorization.  Visual Inspection: documentation of receipt of job description by staff, documentation of annual review and updating, photos of perimeter controls	Compliant. Photos of perimeter controls on file. Facility has a Security monitoring system.	
II-A-003 Sufficient Staff There is a written document describing the facility's organization and staffing plan. This should include an organizational chart that groups similar functions, services and activities. Each facility meets minimum security staffing requirements which reflect good correctional practice. Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of offenders and, as needed to operate the facility in conformance with the BJG.		



Visual Inspection: records of staff deployment, facility logs, documentation of annual review of staffing analysis and plan		
II-A-004 Female Offenders and Female Staff When a female offender is housed in a facility, at least one female staff member is on duty at all times.  Visual Inspection: records of staff deployment, facility logs	Compliant. Facility does not house female offenders.	
II-A-005 No Offender Control Over Others No offender or group of offenders is given control, or allowed to exert authority over other offenders. Visual Inspection: written policy and procedure	Compliant. A written policy and procedure is in place.	
II-A-006 Staff Log Correctional staff maintain a permanent log and prepares shift reports that record routine information, emergency situations and unusual incidents. The facility shall maintain written records or logs which continuously document the following information:  1. Personnel on duty;  2. Offender population;  3. Admission and release of offenders;  4. Shift activities;  5. Entry/exit of all visitors including legal/medical;  6. Unusual occurrences or facility emergencies (including but not limited to major and minor disturbances such as riots, hostage situations, fires, escapes, deaths, serious illness or injury and assaults or other acts of violence.)	Compliant. Copies of log books were on file to show compliance with each item listed in the guideline.	
Visual Inspection: copies of log book, records of staff deployment		

	Findings	Response
II-A-007 Counts The facility has a system for physically counting offenders. At least one formal count is conducted for each shift, with no less than 3 counts daily. The system includes strict accountability for offenders assigned to work and other approved temporary absences. Visual Inspection: completed forms, facility records/logs.	Compliant. Completed head count forms on file to reflect compliance.	
TI-A-008 Offender Population Management System There is an offender population management process that includes records on the admission, processing, and release of offenders. Written policy, procedure, and practice provide for offender case record management that includes at a minimum, maintenance of the following documents and information. This offender record and any reentry transition envelops shall be transferred with the offender at such time the offender is transferred to another local or DPS&C facility.  1. Master prison form; 2. Bill of Information and Court Minutes OR Uniform Commitment Order; 3. One photograph; 4. Reports of disciplinary actions, grievances, incidents, or crimes committed while in custody.		



In addition to the maintenance of the above information, the following shall be collected and forwarded to the DPS&C Pre-Class Coordinator either by fax to 225-342-3759 or email to DOC-HQ_Supplemental@la.gov.  1. Master prison form;  2. Fingerprints: one FBI print card from AFIS;  3. One photograph;  4. Bill of Information and Court Minutes or Uniform Commitment Order for each conviction (for probation violators both the original sentencing minutes and the revocation minutes are required);  5. Jail credit letter;  6. One Inventory Acknowledgment Form (cash and property Visual Inspection: completed forms, reports,		
offender record		
II-A-009 Reception - Legal Commitment and	Compliant. All transfers of DPS&C	
Medical Service Prior to accepting custody of an offender, staff determine	offenders are reported to OAS. Facility does not house any out of	
that the offender is legally committed to the facility, and	state offenders.	
Visual Inspection: Completed Admission forms,		
facility logs.		
II-A-010 Admissions	Compliant. Receipts for personal	
Admission processes for a newly admitted offender include, but are not limited to:	property, basic data and photos/fingerprints on file to	
•Searching of the offender and personal property;	support compliance.	
Inventorying and providing secure storage of personal	Support compilation.	
property;		
<ul> <li>Providing an itemized receipt for personal property;</li> <li>Recording of basic personal data;</li> </ul>		
Performing a criminal history check;		
Photographing and fingerprinting;		
•Separating from the general public;		
<ul> <li>Providing a health screening to assess and identify any health and safety needs;</li> </ul>		
Providing information about access to health services,		
Visual Inspection: intake and admission forms,		
screening forms, inventory form, receipt form		
II-A-011 Out of State Offenders	Compliant. Facility does not house	
The names of any out of state offender (federal or state) to	any out of state offenders.	
be housed at a local jail or privately managed facility shall		
be submitted to the Chief of Operations prior to the offender(s) entering the State of LA. No such offender shall		
be housed if the offender would be classified as maximum	*	
custody under the LA DPS&C classification procedures.		
Any offender convicted and sentenced to incarceration by a		
court in another state (federal or state) shall not be released in the State of LA. Any out of state offender		
(federal or state) housed in a local jail or privately managed		
facility shall be returned to an appropriate correctional		
facility located within the state where the offender was		
convicted and sentenced for release in that state, prior to the offender's release date.		
Visual Inspection: offender record, submittal to		
chief of operations of out-of-state offenders to be		
housed at the facility, release/transfer		
Facility - Date BJG Co	mpliance	5



	Findings	Response
II-A-012 Classification System  Written policy, procedure, and practice provide for a written offender classification plan that includes custody required and assignment to appropriate housing. Offender management and housing assignment considers age, gender, legal status, custody needs, special problems and needs, and behavior. All offenders are classified using an objective classification process that at a minimum:  • Identifies the appropriate level of custody for each offender  • Identifies appropriate housing assignment  • Identifies the offender's interest and eligibility to participate in available programs  Visual Inspection: offender housing records, offender classification records	Compliant. Facility has a written	Кезропас
II-A-013 Prohibition on Youthful Offenders Offenders subject to juvenile jurisdiction are housed in adult facilities only under the conditions established by law. If juveniles are committed to the facility, a plan is in place to provide for the following: • Supervision and programming needs of the juveniles to ensure their safety, security, and education; • Classification and housing plans; • Appropriately trained staff. OAS shall be notified of offenders who are under the age of 18 that are sentenced to the DPS&C as an adult for transfer to the appropriate institution. Visual Inspection: admission and housing, offender records, classification records		
II-A-014 Separation in Classification Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation. Visual Inspection: offender housing records, offender classification records, diagram of facility	Compliant. Facility does not house female offenders.	
II-A-016 Photo Identification The facility shall provide each DPS&C offender with photo identification, which the offender shall carry/wear on their person at all times.  Visual Inspection: Offender identification card/wristband.	Compliant. Facility ensures that each offender receives photo ID upon intake.	
II-A-017 Drug Free Workplace Written policy, procedure, and practice provide for a drug- free workplace, which includes at a minimum pre- employment testing, post-accident testing, reasonable suspicion/probable cause testing, and quarterly random testing of all employees. Visual Inspection: drug testing lab fee bills for drug testing of facility employees (including pre- employment, post accident, reasonable suspicion/probable cause, random).	Compliant. A written policy is in place and staff are drug tested quarterly.	



II-A-018 Offender Drug Testing Written policy, procedure, and practice provide for alcohol/drug testing, both randomly and for probable cause. Facility policy will require that a minimum of 5% of the DPS&C offender population shall be drug tested on a monthly basis.  Visual Inspection: Facility log, documentation of alcohol/drug testing of offenders.  II-A-019 Offender Transfers All transfers of DPS&C offenders to other than DPS&C facilities shall be reported to the OAS, at least one day prior to all scheduled transfers and within one business day for all non-scheduled transfers. The DOC offender transfer form shall be submitted by the transferring facility to OAS at least one day prior to the transfer occurring by fax to 225 342-2439 or by email to LocalJailTranfers@la.gov. Offenders should not be transferred to other than DPS&C facilities within 60 days of release, unless for disciplinary reasons.  An offender scheduled for an appearance before the Committee on Parole shall not be transferred prior to the scheduled hearing date. However, if the transfer is deemed unavoidable by the Warden due to security concerns, the Warden shall obtain prior approval for an exception from the DPS&C Chief of Operations or designee. Staff from the Visual Inspection: facility logs, documentation of transfers of DPS&C offenders to other than DPS&C	Compliant. Facility has a policy and procedure in place.	
facilities  II-A-020 Frequency of Cell Checks  Written policy, procedure, and practice provide secure, safe housing by establishing the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staff will document these checks in their staff logs.  Visual Inspection: Facility logs, documentation of frequency of cell checks.	Compliant. Facility has a policy and procedure in place. Documentation on file to reflect.	
B. USE OF PHYSICAL FORCE  References: ACA CJS 1-2B-01, 1-2B-02, 1-2B-03, 1-2B-05, 1-2B-06, 1-4D-12, Dept. Regs. B-06-001 HC-08/IS-D-HCP33, HC-29/IS-D-HCP40, C-01-008/OP-A-19, C-02-006/OP-A-16, C-03-003/OP-A-3	Findings	Response



### II-B-001 Use of Force

The use of force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. Written policy, procedure, and practice govern the use of force and provide that force shall never be used as punishment. When an incident involving use of force with a DPS&C offender results in the termination and/or arrest of an employee, the facility shall immediately report the incident to the DPS&C, Office of Adult Services, telephone number 800-803-8748 during normal business hours or the control center at Elayn Hunt Correctional Center, telephone number 800-842-4399 after hours. In addition, the facility shall provide a written report of the incident to the DPS&C, Chief of Operations within three business days.

Compliant. Written policy and procedure are in place.
Documentation of file shows staff receiving training on use of force.

Visual Inspection: facility records, logs, incident reports, training records

### II-B-002 Use of Restraints

Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including:

- · Conditions under which restraints may be applied;
- · Types of restraints to be applied;
- Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative;
- Monitoring procedures;
- Length of time restraints are to be applied;

Visual Inspection: facility records, logs

Compliant. Written policy and procedure in place. Restraints are mainly used to prevent self injury, injury to others or damage to property. Restraints are not applied for more time than necessary.

Findings	Response



II-B-002-1 Use of Restraints for Pregnant Offenders Written policy, procedure, and practice complies with the following requirements: Restraints During Pregnancy-Related Transportation •Restraints shall not be used on a pregnant offender (1) during any pregnancy related medical distress, (2) while she is being transported to a medical facility or LCIW unless there are compelling grounds to believe that the offender presents either of the following: a) An immediate and serious threat of physical harm to herself, staff, or others; b) A substantial flight risk and the offender cannot be reasonable contained by other means. •If restraints are utilized during transportation, the offender shall not be cuffed behind the back or restrained using waist restraints.	offenders housed at this facility.	
Visual Inspection: facility records, logs		
II-B-003 Use of Firearms The use of firearms complies with the following requirements.  •Weapons are subject to stringent safety regulations and inspections.  •A secure weapons locker is located outside the secure perimeter of the facility.  •Except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which offenders have no access.  •Employees supervising offenders outside the facility perimeter follow procedures for the security of weapons.  •Employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened.  •Employees on duty use only firearms or other security Visual Inspection: training records, safety regulation and inspection reports, photos of	Compliant. Secure weapons locker is located outside the secure perimeter.	
equipment used for unloading and reloading II-B-004 Written Reports	Compliant. Written policy and	
Written reports Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur:  • Discharge of a firearm or other weapon  • Use of less lethal devices to control offenders  • Use of force to control offenders  • Offender(s) remaining in restraints at the end of the shift  Visual Inspection: completed reports, facility records and logs		
VII ASSESSATION AND A MARKANIA DATA AND A STATE OF THE ST	1	
C. CONTRABAND/SEARCHES		
References: ACA CJS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8	Findings	Response

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### II-C-001 Procedures for Searches

Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the offender is concealing contraband and when authorized by the facility administrator or designee. Health care personnel will conduct manual or instrument inspections in private.

Visual Inspection: observation, facility records and logs, offender and staff interviews

Compliant. Procedures are in place	
for searches of the facility and	
offenders.	

D. ACCESS TO KEYS, TOOLS, UTENSILS		
References: ACA CJS 1-2D-01	Findings	Response
II-D-001 Key, Tool, and Utensil Control Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories	Compliant. Facility was found to have an appropriate inventory of keys, tools and utensils.	

### PART III - ORDER

### A. OFFENDER DISCIPLINE

References: ACA CJS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. B-05-001/OP-C-1	Findings	Response
III-A-001 Rules and Discipline Prior to being placed in the general population, each	Compliant. Offenders are provided with a copy of the DPS&C Rulebook	
offender is provided with an orientation that includes facility rules and regulations, including access to medical care and the process for applying for restoration of good time. The facility shall follow and provide the DPS&C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population.  •If the Sheriff or local jail administrator believes that a loss of good time is appropriate, then the incident shall be fully documented and the offender transferred to the DPS&C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4.  The offender must sign and date a statement		
Visual Inspection: offender records, disciplinary		

### PART IV - CARE

of orientation

### A. FOOD SERVICES

References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06. Dept. Reg. C-06-001/IS-C-1

records, receipt of disciplinary rules, documentation

Findings Response



IV-A-001 Food Storage Facilities	Compliant. Last DHH retail food	
There are sanitary facilities for the storage of all foods that	inspection was on 7/5/22.	
comply with applicable state and/or federal guidelines.		
Visual Inspection: DHH inspection reports, internal		
inspection reports		
IV-A-002 Food Service Facilities	Compliant. Toilets and hand basins	
Toilet and hand basin facilities are available to food service	are available to food service	
personnel in the food preparation area.	personnel.	
Visual Inspection: DHH inspection reports, photos		
IV-A-003 Food/Dietary Allowances	Compliant.	
The facility's dietary allowances are reviewed at least		
annually by a qualified nutritionist or dietician to ensure		
they meet the national recommended dietary allowances for		
basic nutrition for appropriate age groups. Menu		
evaluations are conducted at least quarterly by food service		
supervisory staff to verify adherence to the established		
basic daily servings. Written policy, procedure, and		
practice require that food service staff plan menus and		
substantially follow the plan. The planning and preparation		
of all meals shall take into consideration nutritional		
characteristics and caloric adequacy. The facility shall		9
provide a tray/plate and utensil(s) for each hot meal.		
Vigual Inspections, annual reviews, nutritionist or		
Visual Inspection: annual reviews, nutritionist or dietician qualifications, documentation of at least		
annual review and quarterly menu evaluations		
IV-A-004 Records of Meals Served	Compliant, Logs on file to reflect	
Written policy, procedure, and practice require that	accurate records are maintained of	
accurate records are maintained of all meals served.	all meals served.	
Visual Inspection: facility logs		
IV-A-005 Denial of Food as Discipline Prohibited	Compliant. Facility logs reflects	
Written policy, procedure, and practice preclude the denial	that food is not denied as a	
of food as a disciplinary measure.	disciplinary measure.	
Visual Inspection: facility logs		
IV-A-006 Food Service Management	Compliant. Two hot meals are	
Written policy, procedure, and practice require that three	provided daily from Bakery Barn	
meals (including two hot meals) are provided under staff	Restaurant. Sandwiches are	
supervision at regular meal times during each 24-hour	provided for the lunch meal.	
period, with no more than 14 hours between the evening		
meal and breakfast. Variations may be allowed based on		
weekend and holiday food service demands provided basic		
nutritional goals are met. Offenders shall be provided an		
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.		
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times		
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times served, facility logs	Compliant There were no offenders	
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times served, facility logs  IV-A-007 Therapeutic/Special Diets	Compliant. There were no offenders	
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times served, facility logs  IV-A-007 Therapeutic/Special Diets  Therapeutic and/or special diets are provided as prescribed	currently requiring	
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times served, facility logs  IV-A-007 Therapeutic/Special Diets  Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require	currently requiring therapeutic/special diets at the	
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times served, facility logs  IV-A-007 Therapeutic/Special Diets  Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws. Written policy,	currently requiring therapeutic/special diets at the time of inspection. A written policy	
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times served, facility logs  IV-A-007 Therapeutic/Special Diets  Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws. Written policy, procedure, and practice provide for special diets as	currently requiring therapeutic/special diets at the	
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times served, facility logs  IV-A-007 Therapeutic/Special Diets  Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws. Written policy, procedure, and practice provide for special diets as  Visual Inspection: health records, diet records or	currently requiring therapeutic/special diets at the time of inspection. A written policy	
nutritional goals are met. Offenders shall be provided an ample opportunity to eat for each meal.  Visual Inspection: records of meals served and times served, facility logs  IV-A-007 Therapeutic/Special Diets  Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws. Written policy, procedure, and practice provide for special diets as	currently requiring therapeutic/special diets at the time of inspection. A written policy	



IV-A-008 Health Protection for Food Service There is adequate protection for all offenders and staff in the facility and for offenders and other persons working in food service. All persons involved in the preparation of the food receive a pre-assignment inspection by appropriate kitchen staff, to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils. Offenders working in food services are monitored each day for health and cleanliness by appropriate kitchen staff. All food handlers are instructed to wash their hands upon reporting to duty and after using toilet facilities.	Compliant. Offenders receive a premedical assessment prior to being assigned to the culinary duties.
Visual Inspection: inspection reports, completed forms, documentation of daily monitoring for health and cleanliness	

B. HYGIENE	1	
References: ACA CJS 1-4B-01, 1-4B-02, 1-4B-03, 1-4B-04, Dept. Reg. B-06-001/HC-34/IS-C-3	Findings	Response
IV-B-001 Plumbing Fixtures - Toilets and Washbasins Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas. Visual Inspection: maintenance records or reports, inspections, documentation of periodic measurement of water temperature, offender grievances	Compliant. Documentation on file of plumbing fixtures and work orders being completed as needed.	
IV-B-002 Plumbing Fixtures - Showers Offenders, including those in medical housing units or infirmaries, have access to operable showers with temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit.  Visual Inspection: maintenance records or reports, inspections	Compliant. Logs on file reflect the water temperature for showers is in the required range. Offenders have access to showers 24 hr per day.	
IV-B-003 Clothing The facility has an obligation to provide adequate institutional clothing appropriate to the season and the offender's work status, including adequate changes of clothing to allow for regular laundering. The facility may fulfill this obligation by furnishing clothing or permitting the Visual Inspection: documentation of clothing issue, documentation of cleaning and storage	Compliant. The facility provides adequate clothing as needed.	
IV-B-004 Hygiene/Bedding Issue The facility shall provide adequate bedding and linen, including a clean mattress, sheets, pillow and blanket, not to exclude a mattress with integrated pillow. There are provisions for linen and towel exchange at least weekly. There are provisions for blanket exchange at least monthly.  Visual Inspection: documentation of issue and exchange	Compliant. Facility has a schedule in place for linens and towels exchange weekly. Offenders are provided adequate bedding necessities.	

Response



IV-B-005	Personal	Hygiene
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Articles and services necessary for maintaining personal hygiene shall be available to all offenders including items specifically needed for females. Such items shall be provided to any offender (male or female) who is indigent. Each offender shall be provided soap, toilet paper, toothbrush, toothbaste and shaving equipment.

Visual Inspection: documentation that items are provided, list of items available

Compliant. Personal hygiene items are issued upon intake and distributed as needed.

### C. CONTINUUM OF HEALTH CARE SERVICES

References: ACA CJS 1-2A-14, 1-4C-01, 1-4C-03, 1-4C-04, 1-4C-06, 1-4C-07, 1-4C-08, 1-4C-09, 1-4C-10, 1-4C-13, 1-4C-15, 1-4D-01, 1-4D-03, 1-4D-04, 1-4D-06, Dept. Regs. B-06-001/IS-D-2, HC-01/IS-D-HP13, HC-02/IS-D-HCP14, HC-05/IS-D-HCP20, HC-06A/IS-D-HCP41, HC-06B/IS-D-HCP42, HC-06C/IS-D-HCP46, HC-08/IS-D-HCP33, HC-09A/IS-D-HCP22, HC-11/IS-D-HCP34, HC-13/IS-D-HCP16, HC-17/IS-D-HCP7, HC-38/IS-D-HCP30, B-06-003/AM-C-4, C-02-008/OP-C-9, C-05-001/AM-I-4

### IV-C-001 Access to Care/Clinical Services

At the time of admission/intake, all offenders are informed about procedures to access health services, including any copay requirements, as well as procedures for submitting grievances. Medical care is not denied based on an offender's ability to pay. The facility has a designated health authority with responsibility for health care services. When the health authority is other than a physician, final Written policy, procedure, and practice provide for the delivery of health care services, including medical, dental and behavioral health services under the control of a designated health care authority who shall be a physician or a licensed or registered health care provider or health agency. Access to these services shall be unimpeded in the sense that correctional staff should not approve or disapprove offender requests for services in accordance with the facility's health care plan. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extractions of non-restorable teeth, and referral to a dental specialist, including an oral surgeon. Specialty non primary clinical services are covered by DPS&C. The requests shall be submitted by the facility staff using the software provided •In accordance with R.S. 15:831, DPS&C offenders may be

assessed a co-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The co-payment fee schedule shall be approved by the DPS&C. Such fee schedule for DPS&C offenders housed in local jail facilities shall not exceed the DPS&C approved rate in accordance with Dept. Reg. B-06-001 HC-02/IS-D-HCP14,

Compliant. Offenders have access to health care and are informed of services upon reception to the facility.

**Findings** 



•DPS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment.  Visual Inspection: Documentation that offenders are informed about health care and the grievance		
system, a health record, medical copayment fee schedule.		
IV-C-002 Adequate Equipment and Supplies Adequate equipment and supplies for medical services are provided as determined by the health care authority and are in working order.	Compliant. Dr. Eric Arbuckle serves as the health care authority for the facility. (exp. 2/28/23, license # 325874) completed sick call forms	
Visual Inspection: Photos	on file.	

	Findings	Response
IV-C-003 Provision of Treatment  The facility has a designated health authority responsible for health care services. Requests for health services are triaged by health trained persons to ensure that needs are addressed in a timely manner in accordance with the severity of the illness. Written policy, procedure and practice provide that anyone who provides health care services to offenders be licensed, registered or certified as appropriate to their respective professional disciplines. Such personnel shall only practice as authorized by their license, registration or certification. Standing orders are used in the treatment of offenders only when authorized in writing by a physician or dentist. (Standing orders are used in the treatment of identified conditions and for the on-	Compliant. Standing orders on file and approved by Dr. Eric Arbuckle. License # 325874, exp. 2/28/23.	
Visual Inspection: documentation of health authority designation, contract, billing records, sick call request form, a health record, clinical provider schedules, current credentials/licensure		
IV-C-004 Personnel Qualifications/Credentials Correctional or other personnel who do not have health care licenses may only provide limited health care services as authorized by the responsible health care authority and in accordance with appropriate training. This would typically involve the administration of medication, the following of standing orders as authorized by the responsible health care authority and the administration of first aid/CPR in accordance with POST training. Written policy, procedure and practice approved by the health authority require dispensing and administering prescribed medications by qualified personnel.	Compliant. Correctional officers dispense medication and receives annual training.	
Visual Inspection: health records, completed medication administration form, personnel records, copies of current credentials or licensure, documentation of compliance with standing orders, health record entries, staff training records		



### IV-C-005 24 Hour Care

Written policy, procedure, and practice ensure that offenders have access to 24-hour emergency medical, dental, and mental health services, including on-site first aid, basic life support, and transfer to community based services. This requirement may be met by agreement with a local state hospital, a local private hospital, on-call qualified health care personnel (see IV-C-003), or on-duty qualified health care personnel. Decisions regarding access to emergency medical services shall not be the sole province of correctional or other non-health personnel

Compliant. Medical coverage is provided through West Carroll Hospital 24 hrs a day. The facility also utilizes Ochsner LSU Health, Monroe Medical Center.

Visual Inspection: designated facility, provider lists, transportation logs

### IV-C-006 Health Screens

Written policy, procedure and practice require that all DPS&C offenders receive a health screening by health trained or qualified health care personnel upon intake into the facility unless there is documentation of a health screening within the previous 90 days. Screening is conducted in accordance with protocols established by the health authority. If completed by health trained personnel, all intake health screens are to be reviewed by health care personnel as soon as possible. If a facility uses a different screening form, it shall be required to have at a minimum the questions in the Intake Health Care Screening form (IV-C-006-A) provided by DPS&C. The purpose of the health screening is to protect newly admitted offenders who pose a health safety threat to themselves or others from not receiving adequate medical attention. This should include inquiry into:

- Current medical, dental or behavioral health problems and communicable diseases;
- 2. Current treatment plan;
- 3. Current medications, including psychotropic;
- 4. History of hospitalization;
- 5. Suicidal risk assessment;
- Use of alcohol or other drugs including need for possible detoxification;
- a. Appearance and behavior;
- b. Body deformities and other physical abnormalities;
- c. Ease of movement;
- d. Current physical traumas or characteristics and a determination of whether or not the offender should be recommended for immediate transfer to the DS&C for appropriate care;
- e. Any physical impairment (hearing, vision, mobility) or other disability which would impede the offender's access to programs or services. Offenders identified with such an impairment or disability shall be transferred to the DPS&C for further evaluation and determination of appropriate housing placement. [Reference 2008 Resolution Agreement: US DOJ and LA DPS&C.]

Visual Inspection: health records, completed screening form, transfer logs

Compliant. Written policy and procedure in place regarding the health screens of offenders in to the facility. Health screens meet all of the items required in the guideline.

Response



IV-C-006-1	Pregnancy	Management
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Written policy, procedure and practice require that all pregnant offenders have access to obstetrical services by a qualified provider.

The local jail facility shall notify the Department's Medical Director, when a DPS&C offender is pregnant to ensure proper placement or if transfer to a DPS&C facility is necessary.

Visual Inspection: written policy and procedure, health record where pregnant offender received obstetrical services by a qualified provider, notification to DPS&C when DPS&C offender is pregnant, transfer logs

Compliant. Written policy and procedure in place. There are no female offenders housed at this facility.

### IV-C-007 Communicable Disease and Infection Control Program

Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable diseases, including TB testing within 14 days of arrival at the facility. If there is documented evidence of TB testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontaminating medical and dental equipment must comply with applicable local, state Visual Inspection: health records, clinic visit logs, documentation of waste pic up and/or cleaning logs

# Compliant. Qualified staff evaluates offenders for signs and symptoms of TB.

**Findings** 

### IV-C-008 Annual TB Testing

Written policy, procedure and practice require annual testing or medical evaluation for signs and/or symptoms of tuberculosis on all offenders. Annual TB testing will be provided at no cost to the offender. The facility's designated health care authority shall contact the DPS&C Medical Director, telephone number 225-342-1320, when an offender's test for medical signs and/or symptoms of tuberculosis is reported positive. The DPS&C Medical Director will determine if the offender requires physician or mid-level evaluation, based on the reported positive signs or symptoms.

Visual Inspection: health records

Compliant. Facility conducts TB testing upon intake and annually for offenders at no cost to the offender.

Facility - Date

BJG Compliance



IV-C-009 Chronic Care Program Offenders with chronic conditions, such as diabetes,	Compliant. Facility currently does not house any offender that	
hypertension and mental illness receive periodic care by a	requires chronic care. Such	
qualified health care provider in accordance with individual	offender will be transferred to a	
treatment plans, inclusive as deemed appropriate by the	DOC facility that could	
respective health care provider. For offenders whose	accommodate offenders needs.	
chronic disease cannot be reasonably managed by the local	decommodate offerialis fields	
jail facility, a Medical Transfer Request for DOC Offenders		
at Local Facilities Form C-05-004-B may be submitted to the		
ARDC.		
Visual Inspection: health records		
visual Inspection: health records		
IV-C-010 Pharmaceuticals	Compliant. Offenders are provided	
Written policy, procedure, and practice approved by the	medication as prescribed based	
health authority provide for the proper management of	upon review of health records.	
pharmaceuticals. Offenders are provided medication as	,"	
Visual Inspection: health records, completed		
medication administration forms, inventories		
IV-C-011 First Aid Kits	Compliant. First Aid kits are	
First aid kits are available in areas of the facility as	available in the control room and is	
designated by the responsible health care authority and	approved by Dr. Arbuckle.	
shall be immediately accessible to housing units.		
Visual Inspection: location of first aid kits within the facility		
IV-C-012 Access to Sick Call	Compliant. Offenders have access	
There is a process for all offenders to initiate requests for	to sick call 7 days a week.	
health services on a daily basis. Written policy, procedure	to sick call 7 days a week.	
and practice require that sick call is conducted by a		
physician and/or other qualified health care personnel who		
are licensed, registered or certified as appropriate to their		
respective professional discipline and who practice only as		
authorized by their license, registration or certification. Sick		
call shall be available to all offenders as follows:		
• Facilities with fewer than 100 offenders - 1 time per week;		
<ul> <li>Facilities with 100 to 300 offenders - 3 times per week;</li> </ul>		
<ul> <li>Facilities with more than 300 offenders - 4 times per</li> </ul>		
week.		
If an offender's custody status precludes attendance at sick		
call, then arrangements shall be made to provide such		
services in the place of the offender's detention.		
Visual Inspection: written policy and procedure		
IV-C-013 Infirmary Care	Compliant. Infirmary care is not	
If infirmary care is provided onsite, it complies with	provided on site. 24 hr care is	
applicable state regulations and local licensing	provided by Dr. Arbuckle.	
requirements. Provision include 24 hour emergency on-call		
consultation with a physician, dentist and mental health		
professional. Written policy, procedure and practice		
provide that any offender who is identified as requiring a		
medical, dental or mental health need for which care is not		
readily available from the local facility, shall be immediately		
transferred to DPS&C. It is particularly important that		
smaller facilities recognize the commitment of the DPS&C to		
accept into their custody any state offender whose		
Visual Inspection: admission or inpatient records,		
staffing schedule, completed form C-05-004-B		
	mpliance	17



IV-C-013-1 Medical Releases (Medical Parole,
Medical Treatment Furlough, Compassionate
Release)

Any offender sentenced to DPS&C custody that meets the medical criteria to be released on Medical Parole, Medical Treatment Furlough or Compassionate Release may be considered after submission of the required documentation in accordance with the corresponding Dept. Reg. to the DPS&C's Chief Nursing Officer via email to MedicalDirector@corrections.state.la.us or by fax to 225-

Visual Inspection: health records, documentation of approval of DPS&C's Chief Nursing Officer

# Policies and procedures in place related to medical releases according to DPS&C guidelines. Documentation of such occurrence is maintained.

### IV-C-014 Suicide Prevention and Intervention

There is a written suicide prevention and intervention program that is approved by a behavioral health professional who meets the educational and license/certification criteria specified by his/her respective professional discipline. The program must include specific procedures for handling intake, screening, identifying and continually supervising the suicide-prone offender.

Observation of the suicide-prone offender will vary from continual observation to intervals no greater than fifteen (15) minutes. All staff with responsibility for offender supervision are trained **annually** in the implementation of

Visual Inspection: health records, documentation of staff training, documentation of observation of suicide watches.

Compliant. Written suicide prevention and intervention policy was on file. Training is provided for new, part time and annual training.

**Findings** 

### IV-C-015 Offender Deaths

Written policy, procedure and practice specify and govern the actions to be taken in the event of an offender's death, which includes notification of the coroner of all offender deaths. All attempts to contact the coroner regarding any death shall be thoroughly documented. Such procedures shall also include the reporting requirements as outlined in BJG I-C-001. In addition, a written report of all offender deaths shall be submitted to DPS&C on Form C-05-001-X (via email to catanotify@corrections.state.la.us or via fax to 225-342-3349).

Visual Inspection: notification, reporting requirements, report to DPS&C

Compliant. No offenders deaths this rating period.

Response

Visual Inspection: notification records



IV-C-016 Notification	Compliant. Policies and procedures
A visit with an immediate family member when the offender	in place related to notification of
is admitted to an ICU or trauma center due to a serious	family and visitation with an
bodily injury or due to being a terminally ill offender for the	offender admitted to an ICU or
duration of the offender's admission to the ICU or trauma	Trauma center according to DPS&C
center, unless the Warden or designee provides written	guideline. Documentation of any
notice within 6 hours of the offender's admission to the ICU	such occurrence is maintained.
or trauma center to any immediate family member seeking	
visitation why such visitation cannot be granted, pursuant to	
La. R.S. 15:833(A) and Dept. Reg. C-02-008;	
<ul> <li>If the offender's admission to the ICU or trauma center</li> </ul>	
occurs between 8:00 pm and 4:00 am, the Warden or	
designee shall provide the required written notification	
within 24 hours of the time the serious bodily injury	
occurred.	
•Pursuant to La. R.S. 15:833(A), the Warden or designee	
shall attempt to notify the offender's immediate family	

D. HEALTH SERVICES STAFF	1	
References: ACA CJS 1-4D-02, 1-4D-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-D-HCP9, HC-26/IS-D-HCP10, HC-33/AM-D-5	Findings	Response
IV-D-001 Health Care Quarterly Meetings The health authority meets with the facility administrator at least quarterly Visual Inspection: documentation of meetings	Compliant. Meetings minutes on file between the Warden and the Sheriff regarding health care.	
IV-D-002 Research Written policy, procedure, and practice prohibit offender participation in pharmaceutical, medical, or cosmetic experiments. This policy does not preclude individual treatment of an offender based on his/her needs using a Visual Inspection: written policy and procedure	Compliant. Written policy and procedure in place.	
IV-D-003 Health Care Personnel/Job Descriptions Health care staff work in accordance with professional specific job descriptions approved by the health authority.	Compliant. Job descriptions for health care staff are in place.	
Visual Inspection: job descriptions  IV-D-004 Confidentiality of Health Information Information about an offender's health status is confidential. Nonmedical staff only have access to specific medical information on a "need to know" basis in order to preserve the health and safety of the specific offender, other offenders, volunteers, visitors, or correctional staff. An individual health record is maintained for all offenders in accordance with policies and procedures established by the health authority. The health record is made available to, and is used for documentation for all health care personnel. The active health record is maintained separately from the confinement case record and access is controlled. When an offender is transferred to DPS&C or another local facility, the offender's medical record is transferred		



Visual Inspection: health records, completed consent forms, completed refusal forms		
IV-D-005 Informed Consent Informed consent standards of the jurisdiction are observed and documented for offender care in a language understood by the offender. In the case of minors, the information consent of a parent, guardian or legal guardian applies when required by law. Offenders routinely have the right to refuse medical interventions. When health care is rendered against an offender's will, it is in accordance with state laws and regulations. Involuntary administration of psychotropic medications to offenders may only be accomplished by DDS&C Visual Inspection: health records, completed consent forms, completed refusal forms		
IV-D-006 Emergency Response Emergency medical care, including first aid and basic life support, is provided by all health care professionals and those health-trained correctional staff specifically designated by the facility administrator. All staff responding to health emergencies are trained in CPR. The health authority approves policies and procedures that ensure that emergency supplies and equipment, including Visual Inspection: verification of training, records and certificates	Compliant. All staff receives CPR training.	
IV-D-007 Internal Review/Quality Assurance The health authority approves policies and procedures for identifying and evaluating major risk management events related to offender health care, including offender deaths, preventable adverse outcomes and serious medication errors.  Visual Inspection: evaluation of major risk management events	Compliant. Dr. Arbuckle approved the policy for identifing and evaluating major risk management needs.	

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References: ACA CJS 1-4D-13, 1-4D-15, 1-4D-16, Dept. Regs. A-04-002/PS-D-3, C-01-022/OP-A-15	Findings	Response
IV-E-001 Alleged and Substantiated Sexual Assaults Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of alleged and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes: Prevention/intervention; Self-protection; Reporting sexual abuse/assault; Treatment and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C offender, the facility shall report the incident to DPS&C immediately, as outlined in BJG I-C-001. An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports, that include DPS&C offenders, shall be submitted to appropriate DPS&C Regional Team Leader on Form C-01-	procedure are in place. Staff has	



Visual Inspection: documentation of reports to DPS&C, investigative reports

### **PART V - OFFENDER PROGRAMS AND ACTIVITY**

### A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT

References: ACA CJS 1-5A-01, Dept. Reg. B-08- 004/PS-F-1	Findings	Response
V-A-001 Volunteers/Registration  There is an official registration and identification system for volunteers.	Compliant. A schedule and log of volunteers entering the facility is on file.	
Visual Inspection: activity schedules, facility logs		
V-A-002 Volunteer Services  A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility	Compliant. A current schedule is posted on the bulletin board.	
Visual Inspection: activity schedules, facility logs		
V-A-003 Programs and Services  Written policy, procedure and practice provide for the availability of offender programs, services and counseling. Such programming may be obtained from acceptable internal or external sources which should include, at a minimum, assistance in obtaining individualized educational program instruction at a variety of levels.  The local jail facility shall maintain class files on all DPS&C approved programming, whether the program is administered by DPS&C or other staff. The class files should include at a minimum:  1. Screening of offender(s) for program placement;  2. Offender application to program;  3. Program sign-in sheets and/or attendance rosters;  4. Signed copy of CTRP credit forms;  5. Documentation for staff oversight if program is not	Compliant. Facility does not offer CTRP classes at this time.	
Visual Inspection: activity schedules, facility logs		
V-A-003-1 Educational Programming The DPS&C and the facility encourage educational programming which includes:  1. Adult Basic Education and/or Literacy 2. Industry Based Certification Training 3. Pell-eligible Post-Secondary Training Any planned or proposed programs for education in local jail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director.	Compliant.	
Visual Inspection: activity schedules, facility logs		

### **B. PROGRAMS**



References: ACA CJS 1-4C-02, 1-5B-01, 1-5B-01-1, 1-5B-01-2, 1-5B-01-3, 1-5B-02, 1-5B-02-1, 1-5B-02-2, 1-5B-04, 1-5C-01, 1-5C-04, 1-5C-06, Dept. Regs A-04-002/PS-D-3, B-02-001/IS-B-1, B-06-001/HC-17/IS-D-HCP7, B-08-005/PS-E-1, B-08-013/PS-C-1, B-09-003/AM-C-2, C-01-012/PS-I-1, C-02-008/OP-C-9, C-02-009/OP-C-7	Findings	Response
V-B-001 Releasing Offenders Procedures for releasing offenders from the facility include, but are not limited to, the following:  •Return of personal property, to include any govt. issued ID (i.e., driver's license) that may have been collected from the offender during the intake process.  •Provide offender with/and have him/her sign for any reentry transition document envelopes and all its contents.  •Provision of a listing of available community resources.  •Consideration by the prescribing health care practioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a chronic medical or behavioral health illness), along with a prescription for a thirty (30) day of medication upon transfer or discharge.  •Prior to release, offenders with serious medical and behavioral health conditions are referred to available Visual Inspection: completed release forms and documents, facility records and logs, offender records		
V-B-002 Visiting Written policy, procedure and practice govern visiting. The number of visitors an offender may receive and the length of the visits may be limited only by the facility's schedule, space and personnel constraints or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Dent. Reg. C-02-008.  Visual Inspection: activity schedule, facility logs  V-B-003 Library Services	Compliant.	
Written Reading materials shall be available to offenders on a reasonable basis.  Visual Inspection: activity schedule, facility logs	Compliant.	
V-B-004 Religious Programs Written policy, procedure and practice define and provide reasonable offender opportunity for religious practice. Visual Inspection: documentation of offender religious activities, activity schedule	Compliant. Facility provides religious programming every week.	



V-B-005 Exercise and Recreation Access	Compliant. Offenders have access	
Offenders have access to exercise and recreation	to recreation daily with weather	
opportunities. Written policy, procedure, and practice	permitting.	
provide for exercise opportunities adequate to ensure major		
muscle activity. Outdoor exercise shall be available on a		
regular basis (at least three times per week-weather		
permitting) for state inmates. If a state offender requires		
special management or has security supervision needs		
which preclude the opportunity for outdoor exercise at a		
facility, then he shall be transferred to the DPS&C. If a		
facility based on location, or other legitimate concern, does		
not make provision for outdoor exercise, then		
compensating, dedicated exercise facilities of adequate size		
to provide three exercise opportunities per week shall be		
Visual Inspection: activity schedule, facility logs		
V-B-006 Transitional Work Program/Standard	Facility does not have a TWP	
Operating Procedures	program.	
Transitional Work programs shall be operated in accordance		
with the Standard Operating Procedures for Offender Work		
Balance Balance at Life Land Lands - DDCCC		
Visual Inspection: DPS&C monitoring report		
V-B-007 Participation in Transitional Work	Facility does not have a TWP	
Programs	program.	
Participation in transitional work programs by state		
offenders shall comply with R.S. 15:711 and DPS&C		
Department Regulation No. B-02-001 "Assignment and		
Transfer of Offenders." Specific approval by the Secretary		
of DPS&C is required prior to program assignment of state		
offenders. Refer to Standard Operating Procedures for		
Offender Transitional Work Programs.		
Visual Inspection: approval for participation by the Secretary of DPS&C		
V-B-008 Offender Work Program	Compliant. Facility logs reflect the	
Participation in offender work programs by state offenders	Sheriff's approval for any offender	
shall comply with the provision of R.S. 15:708 (parish jails)	work program.	
or R.S. 15:832 (police maintenance).	Work program.	
Visual Inspection: offender voluntary participation,		
sheriff's approval of work program request, facility		
logs		
	Findings	Response
V-B-009 Approval for Transitional Work Programs	Facility does not have a TWP	
Any Sheriff interested in operation of a TWP facility shall	program.	
obtain prior approval from the Chief of Operations. Refer to		
Standard Operating Procedures for Offender Transitional		
Work Programs.		
Visual Inspection: approval of Chief of Operations		
V-B-010 Proposed Expansions	Compliant. No plans for expansion.	
Any planned or proposed expansions for transitional work		
program or jail facilities that house DPS&C offenders shall		
be submitted to the Secretary of the DPS&C and the		
Executive Director of the LSA for consideration and		
approval.		



V-B-011 Mail and Correspondence Any Offenders may send and receive mail. Indigent offenders receive a specified postage allowance. Offenders are notified in writing when incoming or outgoing letters are withheld in part or in full. Written policy, procedure, and practice govern offender correspondence.	place.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		
V-B-012 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources. Visual Inspection:	Compliant.	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail		

C. REENTRY		
References: Dept. Regs. B-01-001/IS-B-6, B-01- 002/BOP3, B-01-004/IS-B-7, B-06-001/HC-40/IS-D- HCP31	Findings	Response
V-C-001 Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available.	Facility does not have a teacher at present time.	
Visual Inspection: facility log, activity schedule		
V-C-002 Reentry Programs  The DPS&C and the facility encourages reentry programming which includes:  1. Employment opportunities through work release;  2. At least two forms of valid identification upon release;  3. The development of a residential plan prior to release;  4. Referral to community based service providers upon release;  5. Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody. The local jail facility shall maintain reentry transition document envelops for all DPS&C offenders, which include at a minimum, if applicable:  1. Any valid forms of identification;  2. Prescriptions and Medicaid card;	Compliant. Offenders receive two forms of ID upon release and are referred to community based service providers.	
Visual Inspection: documentation of employment opportunity, documentation of two forms of identification, residential plan		
V-C-003 Pre-Parole Preparation The facility shall complete Form B-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jail Facilities, and submit via e-mail to DPS&C HQ at LOCALlarna@corrections.state.la.us or by fax to 225-342- 0929 within the first two weeks of the month proceeding Visual Inspection: offender record, completed questionnaire	Compliant. Completed questionaires are submitted in a timely manner.	

Response



V-C-004 Parole Board Procedur	
	.00

The facility Warden or his/her designee, of the local level facility in which the offender is housed, shall be present to provide information to members of the Parole Board regarding the offender's progress and disciplinary infractions during incarceration.

Visual Inspection: offender record, trip log, documentation showing facility Warden or designee presence at parole board

References: ACA CJS 1-6A-01, 1-6A-02, 1-6A-03, 1-

Compliant.	Documentation on file
to reflect p	ractice.

### **PART VI - JUSTICE**

### A. OFFENDER'S RIGHTS

6A-06, Dept. Reg. C-01-004/OP-C-10

### Visual Inspection: facility log

inmate shall be transferred to the DPS&C.

### VI-A-002 Access to Counsel

Written policy, procedure, and practice ensure offenders' confidential access to counsel. Such contact includes, but is not limited to telephone communications, uncensored correspondence and visits.

Visual Inspection: facility log, record of attorney interviews

### VI-A-003 Protection from Abuse

Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment.

Visual Inspection: facility log, incident reports, staff training records

Compliant. Facility logs show that offenders have access to legal
materials as needed.

**Findings** 

Compliant. Facility logs show that offenders have access to visits with attorney and attorney phone calls as needed.

Compliant. Written policy and procedure in place to ensure offenders are free from protection from abuse.

### **B. FAIR TREATMENT OF OFFENDERS**

References: ACA CJS 1-2A-16, 1-4C-01, 1-6B-01, 1-6B-02, Dept. Reg. B-05-005/OP-C-13	Findings	Response
VI-B-001 Discrimination Written policy, procedure, and practice provide that program access and administrative decisions are made without regard to offenders' race, religion, national origin, gender, sexual orientation, or disability.	Compliant. Written policy and procedure on file.	
Visual Inspection: facility records, grievances, activity logs		

Response



### VI-B-002 Grievance Process

Offenders have reasonable access to a grievance remedy procedure that includes at least two levels of review if necessary. The grievance remedy procedure shall be an administrative means through which an offender may seek formal review of a complaint which relates to any aspect of his imprisonment if less formal procedures have not resolved the matter. Such complaints and grievances include, but are not limited to, actions pertaining to conditions of confinement, personal injuries, medical complaints, time computations, the classification process, or challenges to rules, regulations, or policies. Through this procedure, offenders shall receive reasonable responses within a specified time period and where appropriate,

Compliant. Facility has written grievance process. All offenders interviewed were aware of the grievance process.

PART VII - ADMINISTRATION AND MANAGEMENT

A. RECRUITMENT, RETENTION AND PROMOTION

	ACA-CJS 1-1A-01, 1-1B-01, 1-1C-01, 1-
1C-07, 1-4C-	13, 1-4D-05, 1-4D-14, 1-7B-02, 1-7B-
	Dept. Regs. A-02-028/AM-F-22, C-01-
008/OP-A-19	

### VII-A-001 Training and Staff Development

The facility conducts or participates in a training program which includes orientation for all new employees (appropriate to their job) prior to assuming a position or post. Such training must include:

- 1. Security procedures;
- 2. Hostage procedures including staff roles and safety;
- 3. Fire and emergency plan/ procedures;

Visual Inspection: grievances

- 4. Suicide precaution and signs of suicide risks;
- 5. Use of force policies;
- 6. Inmate rules and regulations;
- 7. CPR and first aid;
- 8. Requirements of the Prison Rape Elimination Act (PREA);
- Employees whose duties are the care, custody and control of offenders must complete the Peace Officers Standards and Training (POST) Level 3 certification training program, which consists of the ACA core curriculum, within one year of employment.

## Visual Inspection: lesson plans, staff training records

### VII-A-002 Weapons Training

All personnel authorized to use firearms and less-than-lethal weapons must demonstrate competency at least annually. Training includes decontamination procedures for individuals exposed to chemical agents.

Visual Inspection: personnel records, training records

Compliant. Training records were
provided to reflect compliance.

**Findings** 

Compliant. The training program

employees prior to them assuming

their job. Documentation reflects

includes orientation for all new

that staff have received the

required annual training.

R.	FA	CIL	TTY	AD	MINT	STRA	TION
<b>D</b> .				$\mathbf{n}$			LITOIA

References: ACA CJS 1-4D-02, 1-7D-01, 1-7D-03, Dept. Reg. C-05-001/AM-I-4	Findings	Response
VII-B-001 Authority	Compliant. Statues on file.	
There is a statue or constitutional provision authorizing the establishment of the local jail facility or its parent agency.		

Facility - Date BJG Compliance 26



Visual Inspection:		
VII-B-002 Legal Assistance for Staff Written policy, procedure and practice specify the circumstances and methods for the facility administrator and other staff to obtain legal assistance as needed in the performance of their duties.	Compliant. Legal assistance provided by Usry, Week and Matthews,	
Visual Inspection: personnel or training records		
VII-B-003 Independent Financial Audit Written policy, procedure and practice provide for an independent financial audit of the facility. This audit is conducted annually or as stipulated by statute or regulation.	Compliant. Audit conducted by Cameron and Company on October 3, 2022 and is on file.	
Visual Inspection: annual audit		
VII-B-004 Facility Insurance Written policy, procedure and practice provide for comprehensive facility insurance coverage.	Compliant. Facility has comprehensive insurance coverage through Gallagatr Bassett exp.	
Visual Inspection: insurance policy	8/23.	
VII-B-005 Offender Funds Offenders' personal funds held by the facility are controlled by generally accepted accounting principals (GAAP). Any interest earned, other than operating funds, accrues to the benefit of the offenders.	Compliant. Offenders funds are controlled by the accounting staff.	
Visual Inspection: offender records		
VII-B-006 Organization Written policies and procedures describe all facets of facility operation, maintenance and administration are reviewed annually and updated as needed. New or revised policies and procedures are disseminated to staff. A file for each guideline shall be maintained with documentation (primarily written) to support compliance. Visual Inspection: annual reviews, dissemination to	Compliant. Basic Jail Guidelines are in order with appropriate policy and procedures.	
staff		
VII-B-007 Annual Compliance Statement Written policy, procedure and practice demonstrate that the facility shall submit an annual statement confirming continued compliance with the BJG to the appropriate DPS&C Regional Team Leader. This statement, submitted by January 31st each year, is in writing and shall include: 1. A copy of the current Fire Marshal Report; 2. A copy of the current Health Inspection Report; 3. Any proposed or projected expansions; 4. Any rehabilitative programs that are available; 5. Summary of any re-entry initiatives/programs implemented by the facility. Visual Inspection: annual statement	Compliant.	



VII-B-008 Monthly Reporting Written policy, procedure and practice ensure that any facility with DPS&C offenders report activities to the Chief of Operations on a monthly basis in accordance with Dept. Reg. C-05-001/AM-I-4. These reports shall be submitted on automated reporting forms provided by the DPS&C, no later than the 15th day of the month for the previous month's activities. Automated reporting shall be completed, by the appropriate DPS&C Regional Team Leader, no later than the 20th day of the month for the previous month's activities.  Visual Inspection: monthly report		**
VII-B-009 Staff Meetings	Compliant. Monthly staff meeting	
Written policy, procedure and practice provide for regular meetings between the Sheriff, facility administrator, or designee and all department heads. There is formal documentation that such meetings are conducted at least monthly.  Visual Inspection: staff meeting minutes/notes	minutes are on file to show compliance.	
C. REASONABLE ACCOMMODATION		
References: ACA CJS 1-7E-01	Findings	Response
VII-C-001 Facility Equipment/Reasonable Accommodation Reasonable accommodations is made to ensure that all parts of the facility are accessible to the public are accessible and usable by staff and visitors with disabilities.	Compliant. Facility is handicapped- accessible by all staff and visitors.	
Visual Inspection:		
	TION REPORTS	
DEPARTMENT	<u>Deficiencies</u>	<b>Corrective Action Taken</b>
Fire Marshall	No deficiencies noted	
Date of Current Report: 6/9/22		
Maximum Capacity: 26		
S 11		
DHH - Health	Matresses and pillows	see attached corrective action.
7/5/2022		action.
Maximum Capacity: 26		
DHH - Retail Food  Date of Current Report: 7/5/22	No deficiencies noted.	



#### John Bel Edwards GOVERNOR

### Office of State Fire Marshal

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

### Inspection Report

Report # CB-21-048899-1

### No Deficient/Cautionary Codes cited.



Daniel H. Wallis FIRE MARSHAL

		l l	Location	n Inform	ation	1		
Inspection Type	Compliance	Building Inspection				Inspection Da	te 6	/9/2022 10:09;49 AM
Structure ID	32647	No. of Bu	ildings	5 2		Facility Code		173
Capacity	26		t	1973		Construction Type T		ype IB / Type II (222)
Building/Trade Na	me			Address	5			
WEST CARROLL F	PARISH JAIL			305 EAS	ST MA	IN STREET, O	AK GROV	E, LA 71263
			Owner	Informa	tion			
Owner Type		Name			Cont	act Phone	Contact	Email
Municipal Project		WEST CARROLL F SHERIFF DEPART				WARDEN FF.NET	@WESTCARROLLSHERI	
Address								
PO BOX 744, OAK	GROVE, LA 7	1263						
			Tenant	Informa	tion			
Name			Suite !		umber Floor Number		er	Square Footage
			Occupa	ancy De	tails			
Occupancy Type		Details						
Institutional				NG TYPE: GROUP I-3 (DETENTION/CORRECTION); ON FACILITY TYPE: CONDITION 2				
				nments	-		1	
NO APPARENT DE	FICIENCIES	AT TIME OF INSPEC	CTION. A	CCEPTA	BLE F	OR OCCUPAN	VCY.	
		Ir	specto	r Inform	ation	1	-	
Name: Jeremy De	fee	Badge Number: 70	)7		Inspe	ctor Signature:		
							25	9
		Person to who	om requ	iremen	ts we	re explained		
Name: Danny Frai	zer	Title: Warden						
						ture: 19 m/v Fnam	Anna	
						. ,,		

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.



## Scott D. Mathews

Sheriff and Ex-Officio Tax Collector West Carroll Parish P. O. Box 744 305 East Main Oak Grove, LA 71263

Phone: (318) 428-2331 Fax: (318) 428-8889

Sheriff@WestCarrollSheriff.net

July 10, 2022

West Carroll Jail received 15 fire retardant mattresses from the Village of Epps to replace torn mattresses.

Danny Frasier

Warden



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

### Detention or Incarceration Notice of Violations

### Routine/Renewal

Permit Number	Permit Name	Permit Name					
62-02-224	West Carroll Parish Jail-	West Carroll Parish Jail-224					
Name of Establishment West Carroll Parish Jail-224		Owner Name	Owner Name				
Address		Date	Time				
305 E Main ST Oak Grove, LA 71263		07/05/2022	01:00 PM				

### LAC TITLE 51 PART XVIII

by this office.		
Category	Code Reference	Description of Violations
Matresses and Pillows	103	53 - Several mattresses are not of impervious material. FACILITY HAS REPLACED A NUMBER OF MATTRESSES FROM LAST INSPECTION, HOWEVER GETTING THE NUMBER THEY NEED IS A PROBLEM BECAUSE OF SUPPLY ISSUES.

### Comments:

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY DANNY FRAZIER, WARDEN COPY OF REPORT EMAILED TO warden@westcarrollsheriff.net

Number Licensed For		Number in Attendance 31	License Anniversary 06/30/2022	
Sanitarian Name/Print Diane Pritchard	Phone # 318-428-9361	Sanitarian Signature R.S. #		
The above mentioned violations w	ere called to my attention and we	ere explained to me in detail. I hereby agree to		
Correct Critical Violations by		Correct Non-Critical Violations by		
Name/Title DANNY FRAZIER, WARDEN		Signature of Recipient		



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

### Retail Food Notice of Violations

### Routine/Renewal

Permit Number 62-0001053-1	Permit Name WEST CARROLL PARISH JAIL KITCHEN					
Name of Establishment WEST CARROLL PARISH JAIL		Owner Name WEST CARROLL PARISH SHERIFF DEPARTMENT				
Address 305 E MAIN ST OAK GROVE, LA	71263	Date 07/05/2022	Time 01:00 PM			

### LAC TITLE 51 PART XXIII

### Comments:

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY DANNY FRAZIER, WARDEN COPY OF REPORT EMAILED TO warden@westcarrollsheriff.net

### NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print Diane Pritchard	Phone # 318-428-9361	Sanitarian Signature R.S. #			
The above mentioned violations	were called to my attention and were ex	plained to me in detail. I hereby agree to			
Correct Critical Violations by		Correct Non-Critical Violations by			
Name/Title DANNY FRAZIER, WARDEN		Signature of Recipient			

STATE OF LOUISIANA  DEPARTMENT OF HEALTH  OFFICE OF PUBLIC HEALTH					
INSTIT	TUTION REPORT				
Agency License No. N/A	Anniversary Month JUNE				
Name of Establishment WEST CARROLL PARISH JAIL-224	Mailing Address				
Address 305 E MAIN ST					
City, state, Zip Code OAK GROVE LA 71263					
Type of Facility JAILS 31					
Parish West Carroll	Date Inspected 07/05/2022				
The above establishment has been inspected by a representative License is Recommended;  License is Not Recommended;  License is Pending Reinspection;	of this section, and:				
from the standpoint of sanitation	DIANE PRITCHARD	1 3 5 4			
LHS 48 (R 7/99)		D 1014			