

Department of Public Safety & Corrections  
State of Louisiana

JOHN BEL EDWARDS  
GOVERNOR



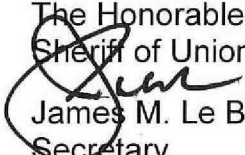
JAMES M. LE BLANC  
SECRETARY



April 14, 2023

**MEMORANDUM**

**TO:** The Honorable Dusty Gates  
Sheriff of Union 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 Union Parish Detention Center on February 22, 2023. The facility continues to provide a secure, safe, and stable environment for DOC inmates in their custody. At this time DPS&C will continue with annual monitoring visits.

Thank you for your support of the BJG process.

JML/mwk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association  
Donnie Adams, Warden, Union Parish Detention Center  
Seth Smith, Chief of Operations  
Jerry Goodwin, Warden, DWCC  
James Arnold, BJG Team Leader



# BJG MONITORING REPORT

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

Rev. 08/01/2022 mwk

**Facility Name:** Union Parish Detention Center  
**BJG Team Leader & Monitors:** Colonel James Arnold, BJB Team Leader  
**Facility Warden & Email Address:** Donnie Adams, dadams@union.net  
**Facility Staff:** Captain Tiara Banks  
**BJG Inspection Date:** February 22, 2023  
**Previous BJB Inspection Date:** April 28, 2022  
**Operational Capacity:** 388  
**Count on Day of Visit:** 343

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

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	260	0	260
Number of Local Offenders	82	1	83
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
<b>TOTAL</b>	<b>342</b>	<b>1</b>	<b>343</b>

## Number of DOC Offenders that are:

Single Bunked 0  
Double Bunked 158  
Triple Bunked 84  
**Total** 242

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

Single Bunked 3  
Double Bunked 15  
Triple Bunked 0  
**Total** 18

**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
May 2022	0	0	0	0
June 2022	0	0	0	0
July 2022	0	0	0	0
Aug 2022	0	0	0	0
Sept 2022	0	0	0	0
Oct 2022	0	0	0	0
Nov 2022	0	0	0	0
Dec 2022	0	0	0	0
Jan 2023	0	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
May 2022	Mojo	0	2	4	Tobacco, cellphone chargers
June 2022	Mojo	0	0	2	Tobacco, cellphone chargers, lighters
July 2022	0	0	0	1	Cell battery, tattoo gun, tobacco, lighter
Aug 2022	0	0	1-pocket knife	1	Cell charger, tobacco
Sept 2022	Mojo	0	0	1	Phone charger, tattoo gun, tobacco
Oct 2022	Mojo	0	0	0	Tobacco, lighters, rolling papers
Nov 2022	Mojo	0	0	0	Tobacco, lighters, battery pack
Dec 2022	Mojo	0	0	1	Cigs, tobacco
Jan 2023	Mojo	0	1	0	Tattoo items, tobacco, and cigs.

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

**Living Area:** Living areas were found to be clean and orderly.

- **Dorms** - Dorms were found to be clean and clutter free. Personal property was stored in offender's lockers. Bulletin boards in dorms displayed information regarding weekly menu, facility policies and DPS&C rulebook. PREA posters were posted.
- **Cell Block** - Cells were clean and property was stored. During the visit I spoke with offender's housed in the cellblock and they voiced no negative comments regarding the facility or their placement of confinement.

**Culinary/Dining:**

Offenders receive a medical pre-assessment prior to their assignment to the kitchen. Last Retail Food Inspection was on December 1, 2022. Culinary tools were inventoried with a check-out system in place. Offender's voiced no negative comments regarding the quantity/quality of meals.

**Bathrooms:**

Bathrooms were inspected and found to be clean and operational.

**Yard Areas:**

Large recreation area is maintained for use by offenders. Area was found to be clean and free of debris.

**Maintenance:**

Tool Inventories were reviewed and found to be accurate with a check-out system in place. Tools are being maintained in a safe and controlled manner.

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

- I-A-001      Safety/Sanitation/Inspections (MANDATORY):** Compliant- Documentation reflects that periodic inspections are conducted. Last inspection by FM was on 12/15/22. Last DHH Incarceration was on 12/01/22. Last DHH Retail Food Inspection was on 12/01/22, see attached reports.
- I-C-001      Emergency Plan (MANDATORY):** Compliant- Facility has an emergency plan submitted for approval. Documentation reflects that staff have been trained on emergency procedures.
- I-C-003      Fire Safety/Code Conformance (MANDATORY):** Compliant- Last FM Inspection was on 12/15/22.
- II-A-006      Staff Log (MANDATORY):** Compliant- Staff logs of pertinent information (shift activity, daily events, security staff/supervisor rounds etc.) were reviewed and found in good order. Logs are in file.
- II-A-007      Counts (MANDATORY):** Compliant
- How many formal counts are conducted each shift? 5 on day shift and 5 on night shift.
  - How many counts are conducted each day? 10
  - **Stick outs counts**
    - How does the facility accomplish this? Staff conducts visual counts according to policy. Documentation on file.
    - Does this process ensure accountability and safe/secure operation of the facility?  
YES
- II-A-008      Offender Population Management System:** Compliant- Written policy and procedures is in place for offender case management. Offender files are transferred with offender to local or DPS&C facility.
- II-A-010      Admissions:** Compliant- Appropriate completed forms are in place to support compliance with this guideline. Offender personal property is inventoried and stored along with a signed offender receipt.

**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? Facility utilizes the same criteria as DPS&C.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

**II-A-016 Photo Identification (MANDATORY):** Compliant- Offender receives a photo ID upon intake to the facility.

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
May 2022	30	195	6.5%	2
June 2022	25	188	7.5%	0
July 2022	20	176	8.8%	0
Aug 2022	20	211	10.5%	0
Sept 2022	35	260	7.4%	0
Oct 2022	20	255	12.7%	1
Nov 2022	30	267	8.9%	2
Dec 2022	25	263	10.5%	0
Jan 2023	25	269	10.7%	0

**II-A-019 Offender Transfers:** Compliant- Policy and procedure are in place and facility logs are maintained to reflect offender transfers.

**II-A-020 Cell Checks (MANDATORY):** Compliant- Policy and procedure are in place and were on file. Cells checks are conducted and are within the guidelines.

**II-B-002-1 Use of Restraints for Pregnant Offenders:** Compliant- Facility houses pre-trial offenders. Policy and procedures are in place and documentation reflects the use of restraints on female offenders.

**II-C-001 Procedures for Searches:** Compliant- Policy and procedure are in place. Documentation on shakedown of dorms and cellblocks on file.

**II-D-001 Key, Tool, and Utensil Control (MANDATORY):** Compliant- Review of keys, tools, and utensils were found to have an accurate accountability in place with inventories and check-out systems.

**III-A-001 Rules and Discipline (MANDATORY):** Compliant-

- Does the facility's offender orientation include the application process for applying for restoration of good time? Yes
- What is their restoration of good time application process for the offender population? All request are forwarded to the facility Warden for his review and then forwarded to DWCC.

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

- IV-A-003 Food/Dietary Allowances (MANDATORY):** Compliant- Cycle menus are reviewed and approved by a registered Dietitian. A tray/ plate and utensil is provided for each hot meal.
- IV-A-006 Food Services Management (MANDATORY):** Compliant- Offenders are provided 3 hot meals per day. Ample time is permitted for meal consumption and time lapse between meals is in compliance within the guidelines.
- IV-B-001 Plumbing Fixtures – Toilets & Washbasins (MANDATORY):** Compliant- All offenders have access to toilets/washbasins with temperatures controlled hot/cold water at all times.
- IV-B-002 Plumbing Fixtures – Showers (MANDATORY):** Compliant- All offenders are able to shower every day. Water temperatures logs indicates full compliance with the guidelines.
- IV-B-005 Personal Hygiene (MANDATORY):** Compliant- Indigent offenders are provided with personal hygiene items if they're not able to purchase them.
- IV-C-001 Access to Care/Clinical Services (MANDATORY)** (Does the facility charge a co-payment? If so, approved by DPS&C?): COMPLIANT- Facility does charge a co-pay and it has been approved by DPS&C. All offenders are seen regardless of their ability to pay facility co-pay.
- IV-C-003 Provision of Treatment (MANDATORY):** Compliant- Dr. Steven Venters # 12351R exp. 3/31/23, Dental Dr. Richard Douciere # 3945 exp. 12/31/23.
- IV-C-005 24 Hour Care (MANDATORY):** Compliant- When offenders medical needs are not meet at the facility Union Parish General Hospital will be utilized along with Ochsner LSU Health-Monroe La.
- IV-C-006-1 Pregnancy Management (MANDATORY):** Compliant- Facility does not house female DOC offenders.
- IV-C-008 Annual TB Testing:** Compliant- TB testing is conducted on all offenders annually at no cost to the offender. Documentation was on file to show compliance.
- IV-C-009 Chronic Care Program (MANDATORY):** Compliant- Only offenders who are stable through use of medication are housed at this facility. All other offenders are transferred to a DOC facility upon approval from DOC.
- IV-C-012 Access to Sick Call (MANDATORY):** Compliant- Sick call is accessible to all offenders 5 time a week. Offenders are referred to a physician as necessary.
- IV-C-013 Infirmary Care:** Compliant- Facility does not manage offenders requiring 24-hour infirmary care. Offenders that require infirmary housing are transferred to a DOC facility.
- IV-C-013-1 Medical Releases** (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): Compliant- Policies and procedures are in place related to medical releases according to DPS&C guidelines. Documentation of any such occurrence is maintained.
- IV-C-014 Suicide Prevention and Intervention (MANDATORY):** Compliant- Suicide prevention and intervention policy is in place. The policy has been approved by Dr. Steven Venters and a signed copy is on file. Documentation reflects that employees are receiving training.

- IV-C-015 Offender Deaths (MANDATORY):** Compliant- No offenders deaths to report this rating period.
- IV-C-016 Notification:** Compliant- Policy and procedures are in place related to notification of family and visitation with an offender admitted to an ICU or Trauma Center according to DPS&C guidelines. Documentation of any such occurrences is maintained.
- IV-D-001 Healthcare Quarterly Meetings (MANDATORY):** Compliant- Quarterly meetings are conducted and documentation is on file.
- IV-D-004 Confidentiality of Health Information/Individual Health Record:** Compliant- Completed and signed consent forms are in place in all offenders files.
- IV-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY):** Compliant- Policy and procedures are in place and on file.
- IV-D-007 Internal Review/Quality Assurance (MANDATORY):** Compliant- Facility has a policy in place that has been approved by a Health Care Authority. Documentation is on file.
- IV-E-001 Alleged and Substantiated Sexual Assaults:**
- 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:
      - If this facility is required to be PREA compliant due to contract language, and has not done so, what is their plan of action for compliance? N/A
- V-A-004 Religious Programs:** Compliant- Volunteers are utilized for religious programs on Tuesdays and Thursdays of each week.
- V-A-005 Exercise & Recreation Access (MANDATORY):** Compliant- Offenders are allowed access daily to recreation with weather permitting.
- V-B-001 Programs and Services:**
- List all Certified Treatment Programs (Attach Form IS-B-8-b) Partners in Parenting, Understanding and Reducing Angry Feelings, MAS Phase 1 & 2, FDIC Money Management.
  - List all other Offender Programs- Religious
- V-B-002 Educational Programming:**
- GED Program**
- |                           |   |
|---------------------------|---|
| Number of GED Slots       | 0 |
| Number of Participants    | 0 |
| YTD Number of Completions | 0 |

- V-B-003**      **Substance Abuse Programs:** Facility does not offer at present time.
- V-C-001**      **Releasing Offenders:** Compliant- Personal property of offenders is returned with a form of ID, available community resources and a five day supply of current medication.
- V-C-002**      **Regional Reentry Programs** (Are offenders releasing with two valid forms of identification?): Compliant- Offenders are released with 2 forms of ID.
- V-C-004**      **Parole Board Procedures:** Compliant- Policy and procedures are in place related to the presence of the Warden or his/her designees being present at Parole Board Hearings. Documentation of any such occurrence is maintained.
- VI-B-002**      **Grievance Process (MANDATORY):** Compliant
- Does grievance process include at least two levels of review? YES
  - Who is the designee at each level of review? Captain 1<sup>st</sup> level, Warden 2<sup>nd</sup> level
  - What is the specified time period for response at each level? 5 Days for 1<sup>st</sup> and 2<sup>nd</sup> levels
- VII-A-002**      **Weapons Training:** Compliant- Facility does not utilize weapons.
- VII-B-010**      **Monthly Reporting:** Compliant- Monthly BJJ reports are submitted in a timely manner.
- VII-B-012**      **Proposed Expansions:** Compliant- No plans for expansion at this time.

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

Staff morale was observed to be good. I spoke with correctional and administrative staff throughout the facility. During the course of the inspection all staff members were professional and eager to assist with the audit as needed.

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

Offender's morale and quality of life is deemed as good. I spoke with several offenders and no negative comments regarding the facility or staff were noted. Offenders were aware of how to submit a grievance and sick call. Facility offers Transitional Work Program for offenders.

**RECOMMENDATION:** Warden Adams and his staff continually maintain compliance with the Basic Jail Guidelines. Based on my walk through inspection of the facility and review of the BJJ files, it is my recommendation that Union Parish Detention Center remain on an annual monitoring.





John Bel Edwards  
GOVERNOR

## Office of State Fire Marshal

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



Daniel H. Wallis  
FIRE MARSHAL

### Inspection Report

Report # CB-22-014543-2

Deficient/Cautiory Codes cited.

Location Information			
Inspection Type	Compliance Building Inspection		Inspection Date 12/15/2022 2:47:43 PM
Structure ID	171368	No. of Buildings	1 Facility Code J258
Capacity		Year Built	2008 Construction Type Type IIB / (000)
Building/Trade Name		Address	
UNION PARISH DETENTION CENTER / VISITORS CENTER		707 RODEO CIRCLE, FARMERVILLE, LA 71241	
Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	UNION PARISH POLICE JURY	(318) 368-1686	LSALLEY@UNIONDC.NET
Address			
, FARMERVILLE, LA 71241			
Tenant Information			
Name	Suite Number	Floor Number	Square Footage
Occupancy Details			
Occupancy Type	Details		
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 5		
Deficient and Cautiory Items			
Description	Code Status	Correction Date	
NFPA 101 11-3.6.1 Owner shall provide fire doors that shall completely close and latch. Currently Fire doors by room 100 and 130 need adjustment in order for it to completely close and latch. Also, the fire door in the visiting shed needs repairing. Fire door shall be repaired to function properly.	DEFICIENT	12/25/2022	
Comments			
YOU HAVE 10 DAYS TO HAVE THE FIRE DOORS REPAIRED SO THAT THEY AUTOMATICALLY COMPLETELY CLOSE AND LATCH WHEN USED. A REINSPECTION WILL BE CONDUCTED AFTER DECEMBER 25, 2022 TO VERIFY COMPLIANCE WITH THIS ORDER.			
Inspector Information			
Name: Christopher Hicks	Badge Number: 332	Inspector Signature:	
Person to whom requirements were explained			
Name: Donnie Adams	Title: Warden	Signature:	

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

**UNION PARISH DETENTION CENTER  
P.O. BOX 749  
707 RODEO CIRCLE  
FARMERVILLE, LA 71241  
PHONE 318-368-9827  
FAX 318-368-7656**

**Corrections Sheet for Fire Inspection**

**Critical Violations:**

Fire doors need adjustment in order for it to completely close and latch. Fire door in visiting shed needs repairing.

**Corrective Action Taken:**

Fire doors were serviced and repaired to function properly.

*Donny Adams*

*2-27-23*



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

**Detention or Incarceration  
Notice of Violations**

Routine/Renewal

Permit Number 56-01-224	Permit Name Union Parish Detention Center-224		
Name of Establishment Union Parish Detention Center-224		Owner Name	
Address 707 Rodeo CIR Farmerville, LA 71241		Date 12/01/2022	Time 11:00 AM

**LAC TITLE 51 PART XVIII**

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

Category	Code Reference	Description of Violations
Building Requirement	101	3 - The walls are in disrepair. Paint peeling on walls in M, L, N and K Cells and A, B, C and D Dorms
Building Requirement	101	7 - There is peeling paint on the walls in the shower. Paint peeling on walls in shower in M, L, N and K Cells [Repeat]
Approved Bathing Facilities	101	24 - There is chipped tile in the shower area. Tiles missing in shower in M, L, N and K Cells [Repeat]

**Comments:**

Copy of report emailed to dadams@uniondc.net

Number Licensed For	Number in Attendance	License Anniversary	
	378	11/30/2022	
Sanitarian Name/Print James Sims	Phone # (318)251-5029	Sanitarian Signature 	R.S. # 3180

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

Correct Critical Violations by

Correct Non-Critical Violations by

Name/Title  
Warden Adams/Warden

Signature of Recipient





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

**Retail Food  
Notice of Violations**

Routine/Renewal

Permit Number 56-0001099-1	Permit Name UNION PARISH DETENTION CENTER		
Name of Establishment UNION PARISH DETENTION CENTER		Owner Name UNION PARISH DETENTION CENTER COMM	
Address 707 RODEO CIR FARMERVILLE, LA 71241	Date 12/01/2022	Time 09:45 AM	

**LAC TITLE 51 PART XXIII**

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

Category	Code Reference	Description of Violations
FOOD PROTECTION	1501	54 - 1501.4 - Food is not stored six (6) inches off the floor. [COS][Repeat]
UTENSILS/EQUIPMENT/SINGLE SERVICE	1321	66 - 1321.2 - An accurate ambient air temperature-measuring device is not provided. (Freezer in commissary)
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.5 - Soap and/or paper towels are not provided for use at the hand wash lavatory. [COS]
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3701	105 - 3701.6 - Floor is not maintained in good repair. (Missing tiles)
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3701	105 - 3701.5 - Floors are not clean.

**Comments:**

Copy of report emailed to dadams@uniondc.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). 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 James Sims	Phone # (318)251-5029	Sanitarian Signature 	R.S. # 3180
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The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to

Correct Critical Violations by

Correct Non-Critical Violations by

Name/Title  
Warden Adams/Warden

Signature of Recipient

**UNION PARISH DETENTION CENTER  
P.O. BOX 749  
707 RODEO CIRCLE  
FARMERVILLE, LA 71241  
PHONE 318-368-9827  
FAX 318-368-7656**

**Corrections Sheet for Detention or Incarceration  
In reference to the Louisiana Department of Health Detention or Incarceration violations.**

**Non- Critical Violations**

**3- The walls are in disrepair. Paint peeling on walls in M, L, N, K Cells and A, B, C and D Dorms.**

**Corrective Action Taken:**

**The walls have been repainted.**

**7- There is a peeling paint on the walls in the shower. Paint peeling on walls in shower in M, L, N and K cells.**

**Corrective Action Taken:**

**Walls in shower have been painted**

**24- There is chipped tile in the shower. Tiles missing in shower in M, L, N, and K cells.**

**Corrective Action Taken:**

**Tiles in the showers have been replaced.**

*Donnie Adams*

*8.22.23*

**UNION PARISH DETENTION CENTER  
P.O. BOX 749  
707 RODEO CIRCLE  
FARMERVILLE, LA 71241  
PHONE 318-368-9827  
FAX 318-368-7656**

**Corrections Sheet for Food Violations**

**In reference to the Louisiana Department of Health Detention or Incarceration violations.**

**Non- Critical Violations**

**66- An accurate ambient air temperature-measuring device is not provided.**

**Corrective Action Taken:**

**Thermostats have been placed on freezer.**

**105- Floors is not maintained in good repair. (Missing tiles)**

**Corrective Action Taken:**

**Missing tiles have been replaced.**

**105- Floors are not clean.**

**Corrective Action Taken:**

**Floors are cleaned on a daily basis.**

*Denise Adams*  
*2-27-23*

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

Facility: Union Parish Detention Center

Date: 02-22-23

Name of Program: Partners in Parenting

Date of Program Implementation: \_\_\_\_\_

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.

*Carl James Acumb*  
Monitoring Team Member or BJG Team Member/Leader

2-22-23  
Date

Form IS-B-8-b  
05 November 2010

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

Facility: Union Parish Detention Center

Date: 02-22-23

Name of Program: Understanding and Reducing Angry Feelings

Date of Program Implementation: \_\_\_\_\_

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.

Det. James Amnell  
Monitoring Team Member or BJJ Team Member/Leader

2-22-23  
Date



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

Facility: Union Parish Detention Center

Date: 02-22-23

Name of Program: MAG Phase 1 and 2

Date of Program Implementation: \_\_\_\_\_

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.

*Cal. Lamar*  
Monitoring Team Member or BJG Team Member/Leader

2-22-23  
Date

Form IS-B-8-b  
05 November 2010

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

Facility: Union Parish Detention Center

Date: 02-23-23

Name of Program: FDIC Money Management

Date of Program Implementation: \_\_\_\_\_

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.

Col. James A. Small  
Monitoring Team Member or BJC Team Member/Leader

2-22-23  
Date