

Department of Public Safety & Corrections
State of Louisiana

JOHN BEL EDWARDS
GOVERNOR



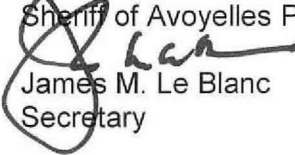
JAMES M. LE BLANC
SECRETARY

Handwritten signature of James M. Le Blanc.

May 3, 2023

MEMORANDUM

TO: The Honorable David Dauzat
Sheriff of Avoyelles 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 Avoyelles Cottonport Women's Correctional Center on March 2, 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
Tracy Dupuis, Warden, Avoyelles Women's Correctional Center
Seth Smith, Chief of Operations
Marcus Myers, Warden, RLCC
Chad Firmin, BJG Team Leader



BJG MONITORING REPORT

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

Rev. 08/01/2022 mwk

Facility Name: Avoyelles Cottonport Women’s Correctional Center
BJG Team Leader & Monitors: Lt. Col. Chad Firmin
Facility Warden & Email Address: Tracy Dupuis Tdupuis@avoyellesso.org
Facility Staff: Richard Ducote
BJG Inspection Date: March 2, 2023
Previous BJJ Inspection Date: June 30, 2021
Operational Capacity: 317
Count on Day of Visit: 116

Concerns or Issues from the previous BJJ Monitoring Inspection: None

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	0	54	54
Number of Local Offenders	0	62	62
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	0	116	116

Number of DOC Offenders that are:

Single Bunked 0
 Double Bunked 54
 Triple Bunked 0
Total 54

Number of DOC Offenders that are in Restricted Housing:

Single Bunked 0
 Double Bunked 0
 Triple Bunked 0
Total 0

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

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
February 2022	0	0	0	0
March 2022	0	0	0	0
April 2022	0	0	0	0
May 2022	2	0	0	0
June 2022	0	0	0	0
July 2022	0	0	0	0
August 2022	0	0	0	0
September 2022	0	0	0	0
October 2022	0	0	0	0
November 2022	0	0	0	0
December 2022	0	0	0	0
January 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
February 2022	0	0	0	2	8 tobacco
March 2022	0	0	0	0	4 tobacco
April 2022	0	0	0	3	3 tobacco
May 2022	0	0	0	0	6 tobacco, 1 lighter
June 2022	0	0	0	0	0
July 2022	0	0	0	0	1 tobacco, 1 lighter
August 2022	0	0	0	0	0
September 2022	0	0	0	0	1 tobacco, 1 vape
October 2022	0	0	0	0	1 tobacco, 1 lighter
November 2022	0	0	0	1	2 condoms, 2 homemade sex toys, 2 vapes
December 2022	0	0	0	0	1 tobacco, 2 lighters, 1 vape
January 2023	0	0	0	0	0

GENERAL APPEARANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:

Living Area:

- **Dorms** –The dorms are clean and offender beds are made up. Beds have mattresses, blankets, sheets and pillow. Offender belongings are stored in locker boxes.
- **Cell Block** – There is no cellblock at the facility. There are 3 lockdown cells at the facility. There were no offenders housed in the lockdown cells on the day of the audit. Cells are clean.

Culinary/Dining: The dining hall is clean and used for multi purposes. On the day of the audit the dining hall was being used for church service.

Bathrooms: The bathrooms are clean and in working order. The showers are on timers and a shower schedule is put out to offender population. The purpose of the timers for the showers is that the water was being left on and it is a cost saving measure for the facility.

Yard Areas: The yard area in front is cut and clean. The yard area in the back of the facility and around the fence needs to be cut. The facility is in the process of getting the grass cut.

Maintenance: There is no maintenance facility located at the facility. The maintenance department is located at the jail in Marksville.

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

I-A-001 Safety/Sanitation/Inspections (MANDATORY): Compliant - Weekly and monthly inspections being done at the facility. FM inspection done 3/24/22, DHH inspections 12/01/22

I-C-001 Emergency Plan (MANDATORY): Compliant - Emergency plan in file and approved by FM 3/24/22.

I-C-003 Fire Safety/Code Conformance (MANDATORY): Compliant - Facility follows safety code.

II-A-006 Staff Log (MANDATORY): Compliant - Copy of staff on duty, offender population, offenders exiting and returning to and from work and daily activities logged in book and on file.

II-A-007 Counts (MANDATORY): Compliant -

- How many formal counts are conducted each shift? 4 each shift
- How many counts are conducted each day? Minimum of 8
- **Stick outs counts**
 - How does the facility accomplish this? A log of offenders exiting the facility is kept and the officer working in control will call the count into booking at the Avoyelles Marksville Jail.
 - Does this process ensure accountability and safe/secure operation of the facility?
Yes

II-A-008 Offender Population Management System: Compliant - Offenders master prison record, court minutes, photographs and fingerprints all in file and on record.

II-A-010 Admissions: Compliant - Offenders property searched and inventoried upon admissions. Fingerprints and photographs also on file.

II-A-012 Classification System: Compliant - Policy on file for the classification of offenders.

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? Criminal history, current convictions, disciplinary record, level of custody, and medical or mental health disorders are all check for eligibility for trustee and approved by the Warden.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

II-A-016 Photo Identification (MANDATORY): Compliant - Photo ID's are given.

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
February 2022	22	30	73	0
March 2022	25	28	89	0
April 2022	25	37	68	0
May 2022	4	40	10	0
June 2022	24	53	45	0
July 2022	22	51	43	0
August 2022	20	52	38	0
September 2022	16	57	28	0
October 2022	25	57	44	3
November 2022	20	60	33	1
December 2022	17	54	31	0
January 2023	22	53	42	0

II-A-019 Offender Transfers: Compliant - Copy of offenders transferred to other facilities on file.

II-A-020 Cell Checks (MANDATORY): Compliant - Officers make rounds at least every 30 minutes if an offender is on a suicide watch. Dorm rounds are made at least every hour.

II-B-002-1 Use of Restraints for Pregnant Offenders: Compliant - Policy in place. There are no pregnant offenders housed at the facility on the day of the audit.

II-C-001 Procedures for Searches: Compliant - Policy on file for offender searches. Record of searches are logged and on file.

II-D-001 Key, Tool, and Utensil Control (MANDATORY): Compliant - Kitchen tools and utensils are on inventory and signed in and out. Keys are logged out by officers in the control room.

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

- Does the facility's offender orientation include the application process for applying for restoration of good time? Yes
- What is their restoration of good time application process for the offender population? Offenders will request the form to fill out to apply for restoration of good time. Once reviewed and approved by the Warden then it is submitted to Headquarters.
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes

IV-A-003 Food/Dietary Allowances (MANDATORY): Compliant - Dietician approved menus are received through LAMM food services. License is on file.

IV-A-006 Food Services Management (MANDATORY): Compliant - Record of meals served is on file. At least 2 of the 3 meals are hot meals.

IV-B-001 Plumbing Fixtures -- Toilets & Washbasins (MANDATORY): Compliant - Toilets and washbasins are available and in working order.

- IV-B-002 Plumbing Fixtures – Showers (MANDATORY):** Compliant - Showers are available and on a timed schedule. Hot water for showers are checked and recorded. A shower schedule is sent to offender population.
- IV-B-005 Personal Hygiene (MANDATORY):** Compliant - A list of hygiene items on file that is issued to offenders and signed for upon arrival.
- 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 co-pay
- IV-C-003 Provision of Treatment (MANDATORY):** Compliant - Dr. Austin Williams is the new health authority for the facility. Letter in file stating such.
- IV-C-005 24 Hour Care (MANDATORY):** Compliant - Nurses work Monday through Friday but are on call after hours and can get called in to treat an offender if needed.
- IV-C-006-1 Pregnancy Management (MANDATORY):** Compliant - Policy on file. No pregnant offenders housed on the day of the audit.
- IV-C-008 Annual TB Testing:** Compliant - TB testing done annually.
- IV-C-009 Chronic Care Program (MANDATORY):** Compliant - Chronic care policy in place. If an offender requires more intense care than can be provided by the facility then the offender is transferred to a facility where proper care can be obtained.
- IV-C-012 Access to Sick Call (MANDATORY):** Compliant - Offenders can access sick call 5 days a week. They can fill out a request and drop it in the nurses box in the hall way. The nurse picks up the request daily.
- IV-C-013 Infirmary Care:** Compliant - There is no infirmary at the facility just a nurse station.
- IV-C-013-1 Medical Releases** (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): Compliant - There has been no medical parole or medical furloughs or compassionate releases from the facility.
- IV-C-014 Suicide Prevention and Intervention (MANDATORY):** Compliant - Suicide prevention policy on file and approved by Caring Choices (Behavioral Center) in Marksville.
- IV-C-015 Offender Deaths (MANDATORY):** Compliant - No offender deaths
- IV-C-016 Notification:** Compliant - No offender has been admitted to ICU or trauma center to notify family members.
- IV-D-001 Healthcare Quarterly Meetings (MANDATORY):** Compliant - Healthcare quarterly meeting on file. Staff present sign in sheet along with topics of discussion on file.
- IV-D-004 Confidentiality of Health Information/Individual Health Record:** Compliant - All health information for offenders is kept confidential.
- IV-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY):** Compliant - Narcan is available to use at the facility. Policy in place for proper use. Staff is trained.

- IV-D-007 Internal Review/Quality Assurance (MANDATORY):** Compliant - Internal review is done as needed.
- IV-E-001 Alleged and Substantiated Sexual Assaults:** Compliant -
- Is this facility required to be PREA compliant due to contract language? No
 - Is this facility PREA compliant? No
 - If yes, date compliance received:
 - 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?
- V-A-004 Religious Programs:** Compliant - Religious services provided. Religious program was being done on the day of the audit in the dining hall before the lunch meal being served.
- V-A-005 Exercise & Recreation Access (MANDATORY):** Compliant - Log book documentation of offenders going out for recreation on the yard is on file.
- V-B-001 Programs and Services:** Compliant
- List all Certified Treatment Programs (Attach Form IS-B-8-b)
 - Understanding and Reducing Angry Feelings
 - Thinking for a Change
 - Partners in Parenting
 - LA Mind Altering Substance Abuse Phase I & II
 - FDIC Money Smart Management
 - List all other Offender Programs
 - Church services
- V-B-002 Educational Programming:** Compliant - No Hi-Set taught at this time.
- GED Program**
- | | |
|---------------------------|-----------|
| Number of GED Slots | 35 |
| Number of Participants | 0 |
| YTD Number of Completions | 0 |
- V-B-003 Substance Abuse Programs:** Compliant - Substance abuse programs are provided.
- V-C-001 Releasing Offenders:** Compliant - Offenders are given a list of community services and sign for personal property upon release.
- V-C-002 Regional Reentry Programs (Are offenders releasing with two valid forms of identification?):** Compliant - Offenders are being released with 2 ID's
- V-C-004 Parole Board Procedures:** Compliant - There has been no offender up for parole at the facility as of January 2023. A facility representative is present when an offender does go before the parole board.

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? Warden 1st, Director of Corrections 2nd
- What is the specified time period for response at each level? 40 days 1st, 45 days 2nd

VII-A-002 Weapons Training: Compliant - Training is done annually. Training will be in April 2023

VII-B-010 Monthly Reporting: Compliant - Monthly reports are being done.

VII-B-012 Proposed Expansions: Compliant - There are no proposed expansions at this time.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Tracy Dupuis is the new Warden at the facility. Warden Dupuis is eager to listen to suggestions and working towards more cleanliness and improvements at the facility. Staff was courteous and appear to enjoy the job. Staff morale appeared to be good. Staff also advised that the new roof project to replace the roof over the entire jail will be starting soon. Once the roof is replaced then some ceiling tiles will be replaced inside the jail. The ice machine is not working to provide ice to offenders. A new machine is ordered but has not been delivered as of the date of the audit.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

Spoke to some offenders throughout the facility. Quality of life and offender morale appear to be good. No offender voiced any concerns during the walk through.

RECOMMENDATION:

At this time the monitoring team will recommend continued annual monitoring in accordance with BJJ guidelines.



John Bel Edwards
GOVERNOR

Office of State Fire Marshal

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



H. "Butch" Browning
FIRE MARSHAL

Inspection Report

Report # CB-21-032363-2

No Deficient/Cautionary Codes cited.

Location Information			
Inspection Type	Compliance Building Inspection	Inspection Date	3/24/2022 10:37:27 AM
Structure ID	12333	No. of Buildings	4
Capacity	317	Facility Code	J113
		Year Built	1989
		Construction Type	Type VA / (111)
Building/Trade Name:		Address	
AVOYELLES WOMEN'S CORRECTIONAL CENTER		641 CHOUIPQUE LANE, COTTONPORT, LA 71327	
Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	WARDEN CONNIE ADAMS	(318) 876-2871	LKIMBLE@AVOYELLESSO.ORG
Address			
, COTTONPORT, LA 71327			
Tenant Information			
Name	Suite Number	Floor Number	Square Footage
Occupancy Details			
Occupancy Type	Details		
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 4		
Comments			
NO APPARENT DEFICIENCIES NOTED AT TIME OF INSPECTION.			
Inspector Information			
Name: Kevin Billot	Badge Number: 610	Inspector Signature: <i>Kevin M. Billot</i>	
Person to whom requirements were explained			
Name: Laurie Kimble	Title: Chief of Security	Signature: <i>Laurie Kimble</i>	

For questions regarding the contents of this report, please call: (318) 767 6099

R. S. 40: 1621 Whoever falls 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.



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

**Detention or Incarceration
Notice of Violations**

Routine/Renewal

Permit Number 05-05-224	Permit Name Avoyelles Women's Correctional Center-224	
Name of Establishment Avoyelles Women's Correctional Center-224	Owner Name	
Address 640 Choupique RD Cottonport, LA 71327	Date 12/01/2022	Time 10:20 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	6 - The ceilings are not in good repair. [Repeat]
Approved Bathing Facilities	101	24 - There is chipped tile in the shower area.

Comments:

Verbal acknowledgment of the report provided by: Damion Jacobs / director
Copy of the report emailed to: alemoine@avoyellesso.org & djacobs@avoyellesso.org

Showers need cleaning.

Number Licensed For 17	Number in Attendance 129	License Anniversary 08/31/2022
Sanitarian Name/Print Samuel Smith	Phone # 318-487-5282x212	Sanitarian Signature SS/KS/KH
		R.S. # T1301

The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to
Correct Critical Violations by _____ Correct Non-Critical Violations by _____

Signature of Recipient
Name/Title
Damion Jacobs / director

12/1/22, 11:25 AM

State_of_Louisiana_Report_12012022_111025 (003).html

STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH	
INSTITUTION REPORT	
Agency License No. N/A	Anniversary Month AUGUST
Name of Establishment AVOYELLES WOMEN'S CORRECTIONAL CENTER-224	Mailing Address
Address 640 CHOUIPIQUE RD	
City, state, Zip Code COTTONPORT LA 71327	
Type of Facility JAILS 317 129	
Parish Avoyelles	Date Inspected 12/01/2022
The above establishment has been inspected by a representative of this section, and: <input checked="" type="checkbox"/> License is Recommended; <input type="checkbox"/> License is Not Recommended; <input type="checkbox"/> License is Pending Reinspection; from the standpoint of sanitation.	
SAMUEL SMITH	
LHS 48 (R 7/99)	D 1014



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

**Retail Food
Notice of Violations**

Routine/Renewal

Permit Number 05-0001024-1	Permit Name AVOUELLES WOMEN'S CORRECTIONAL CTR JAIL KITCHEN
Name of Establishment AVOUELLES WOMEN'S CORRECTIONAL CTR	Owner Name AVOUELLES PARISH SHERIFF'S OFFICE
Address 641 CHOUIPIQUE LN COTTONPORT, LA 71327	Date 02/03/2022
	Time 09:30 AM

LAC TITLE 51 PART XXIII

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

Category	Code Reference	Description of Violations
FOOD CONTACT EQUIPMENT/UTENSILS, CONSTRUCTION AND SANITIZATION	2513	30 - 2513 - Chlorine sanitizer concentration for warewashing is not between 50-100 p.p.m. at 75°F. *paper products will be used [COS][Repeat]
FOOD CONTACT EQUIPMENT/UTENSILS, CONSTRUCTION AND SANITIZATION	2513	30 - 2513 - Quaternary ammonium solution concentration for warewashing is not 200 p.p.m. at 75°F. *paper products used [COS][Repeat]

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 - 1501.3 - Food is stored where it is exposed to splash, dust, or other contamination [COS]
FOOD PROTECTION	1501	54 - 1501.1 - Food is not stored in a clean, covered container. [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2301	72 - 2301 - Equipment used for cooling, heating and holding cold and hot foods are not sufficient to maintain proper food temperatures.
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.1 - Hand wash lavatory is not accessible [COS]
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.8 - The hand wash lavatory is used for purpose other than hand washing. [COS]
GARBAGE/REFUSE DISPOSAL	3303	98 - 3303.3 - Outside waste receptacles were not kept closed.
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3101	102 - 3101 - Plumbing is not maintained. *3 compartment sink
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.4 - Walls/ceilings or attached equipment are not in good repair.

Comments:

verbal acknowledgement of report provided by Pauline Wells/ Kitchen Manager
Copy of report emailed to djacobs@avoyellesso.org

NOTICE RS 40:31.38 (ACT 66)

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



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

**Detention or Incarceration
Notice of Violations**

Routine/Resoval

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LAC TITLE 51 PART XVIII

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Correct Non-Critical Violations by _____
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Name/Title
Damion Jacobs / director

12/1/22, 11:25 AM

State_of_Louisiana_Report_12012022_011025 (003).html

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LHS 48 (R 7/89)

D 1014



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**Retail Food
Notice of Violations**

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Name of Establishment AVOYELLES WOMEN'S CORRECTIONAL CTR	Owner Name AVOYELLES PARISH SHERIFF'S OFFICE	
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FOOD PROTECTION	1501	54 - 1501.1 - Food is not stored in a clean, covered container. [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2301	72 - 2301 - Equipment used for cooling, heating and holding cold and hot foods are not sufficient to maintain proper food temperatures.
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.1 - Hand wash lavatory is not accessible [COS]
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.8 - The hand wash lavatory is used for purpose other than hand washing. [COS]
GARBAGE/REFUSE DISPOSAL	3303	98 - 3303.3 - Outside waste receptacles were not kept closed.
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3101	102 - 3101 - Plumbing is not maintained. *3 compartment sink
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.4 - Walls/ceilings or attached equipment are not in good repair.



Comments:

verbal acknowledgement of report provided by Pauline Wells/ Kitchen Manager
Copy of report emailed to djacobs@avoyelleso.org

NOTICE RS 40:31.38 (ACT 66)

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

report are corrected by, or during, the follow up inspection. If a fee is assessed, the \$150 fee is payable within 30 days' notice, and failure to pay shall result in revocation of the permit.

Sanitarian Name/Print Paula Guient	Phone # 318-487-5282 x 250	Sanitarian Signature 	R.S. # 1896
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 Pauline Wells/ Kitchen Manager	Signature of Recipient 		



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

**Detention or Incarceration
Notice of Violations**

Routine/Renewal

Permit Number 05-05-224	Permit Name Avoyelles Women's Correctional Center-224	
Name of Establishment Avoyelles Women's Correctional Center-224	Owner Name	
Address 640 Chopique RD Cottonport, LA 71327	Date 02/03/2022	Time 09:30 AM

LAC TITLE 51 PART XVIII

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

Category	Code Reference	Description of Violations
Toilet Facilities	101	18 - *The toilets are in disrepair. Work order placed [COS]

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.
Building Requirement	101	6 - The ceilings are not in good repair.
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair.
Approved Plumbing	101	41 - Drinking fountain is in disrepair. [Repeat]

Comments:
 verbal acknowledgement of report provided by Connie Adams/Warden
 Copy of report emailed to cadams@avoyellesso.org
 djacobs@avoyellesso.org ddauzat@avoyellesso.org

Number Licensed For 317	Number in Attendance 97	License Anniversary 08/31/2022
Sanitarian Name/Print Paula Guent	Phone # 318-487-5282 x 250	Sanitarian Signature
		R.S. # 1896

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
Connie Adams/Warden

Signature of Recipient



Sheriff David L. Dauzat
Avoyelles Parish Sheriff's Office

675 Government Street ↻ Marksville, LA 71351 ↻ (318) 253 - 4000

Date: 1-05-23

To: Mr. Sam Smith
DOH Officer

From: Richard Ducote
Compliance Officer APSO

RE: Response to Inspection of 12-01-2022

Our plan of action to correct the following items resulting from your inspection.

- a. Ceilings are not in good shape—we are awaiting a new roof to be placed On the building. Even though we have replaced all bad ceiling tiles once Once the roof if repaired all ceiling areas will be corrected.**
- b. This has been corrected.**

Kitchen area

- a. Wall/ceilings not in good repair. This has been addressed**
- b. Equipment not clean. This has been corrected.**

A handwritten signature in black ink, appearing to read "Richard Ducote".

Richard Ducote-APSO



Sheriff David L. Dauzat
Avoyelles Parish Sheriff's Office

675 Government Street ↻ Marksville, LA 71351 ↻ (318) 253 - 4000

Date: 1-05-2023

To: DOA Inspector

Re: Inspection of 12-01-22

The following has been addressed as listed below:

Critical Items:

30-2513 Chlorine sanitizer concentration.

This was corrected the day of the inspection.

30-2513 Maintenance notified and corrected.

Non-critical

54-1501.3 Officer and Offender workers instructed on the proper storage.

54-1501.1 All items stored properly in clean and marked containers

72-2301 Maintenance has corrected this item.

94-3109.1 Maintenance instructed to handle this problem

94-3109.8 Officer and offenders instructed on proper use of sinks.

98.3303.3 Officer and kitchen workers instructed that the lids are to stay
Closed at all times.

1102-3101 Leak in sink was corrected.

106-3703.4 Wall/ceilings or attached equipment not in good repair. Roof is
Being redone now and as soon as completed all ceilings will be
Fixed.



Damion Jaxobs--Director



Sheriff David L. Dauzat
Avoyelles Parish Sheriff's Office

675 Government Street ↻ Marksville, LA 71351 ↻ (318) 253 - 4000

Date: 3-07-3022

From: Richard Ducote
Compliance Director-APSO

To: Paula Guient
Board of Health Inspector

Re: Plan of Action in Response to Board of Health Inspection of 2-03-2022

This inspection was for the housing area of the facility. Below is listed the response to all discrepancies noted during the inspection .

CRITICAL ITEMS

101—18 The toilets are in disrepair. Work order placed.

Response: Maintenance states that these were addressed.

NON-CRITICAL ITEMS

101- 3—The walls are in disrepair

Response: Repair issues addressed and painting has begin.

101—6—The ceilings are not in good repair.

Response: All damaged ceiling tiles have been replaced.

101—16—The hand lavatory is in disrepair.

Response: It was replaced.

101—41-Drinking fountain is in disrepair;

Response: Maintenance has addressed.

A handwritten signature in blue ink, appearing to read "Richard Ducote", is written over a horizontal line.

Richard Ducote-Compliance Officer

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

Facility: AVOYELLES WOMEN'S CORRECTIONAL CENTER

Date: 3/1/2023

Name of Program: UNDERSTANDING & REDUCING ANGRY FEELINGS

Date of Program Implementation: 10/2014

Primary Area of Service Provided:

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

Program has been certified by DPS&C? Yes No

Program application process is consistent with DPS&C existing assessment and classification system?

Yes No

Has program curriculum changed during preceding 12 months? Yes No

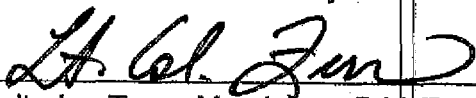
Is there an objective method used to assess completion? Yes No

Detailed records are maintained on the following:

- All offenders who apply. Yes No
- Number of offenders accepted. Yes No
- Number and type of services provided. Yes No
- Offender's completion/termination from program. Yes No

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

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


Monitoring Team Member or BJC Team Member/Leader

Date 3/2/23

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

Facility: AVOYELLES WOMEN'S CORRECTIONAL CENTER

Date: 3/1/2023

Name of Program: THINKING FOR a CHANGE

Date of Program Implementation: 10/2014

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.

St. Col. Furr

Monitoring Team Member or BJC Team Member/Leader

3-2-23

Date

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

Facility: AVOYELLES WOMEN'S CORRECTIONAL CENTER

Date: 3/1/2023

Name of Program: PARTNERS IN PARENTING

Date of Program Implementation: 10/2014

Primary Area of Service Provided:

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

Program has been certified by DPS&C? Yes No

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

Has program curriculum changed during preceding 12 months? Yes No

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

Detailed records are maintained on the following:

- All offenders who apply. Yes No
- Number of offenders accepted. Yes No
- Number and type of services provided. Yes No
- Offender's completion/termination from program. Yes No

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

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

St. Col. Furr

3-2-23

Monitoring Team Member or BJC Team Member/Leader

Date

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

Facility: AVOYELLES WOMEN'S CORRECTIONAL CENTER

Date: 3/1/2023

Name of Program: LA MIND ALTERING SUBSTANCE PHASE I & II

Date of Program Implementation: 10/2014

Primary Area of Service Provided:

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

Program has been certified by DPS&C? Yes No

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

Has program curriculum changed during preceding 12 months? Yes No

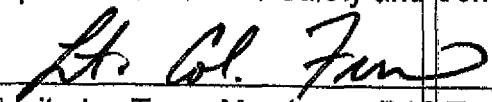
Is there an objective method used to assess completion? Yes No

Detailed records are maintained on the following:

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

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

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


Monitoring Team Member or BJC Team Member/Leader

3-2-23
Date

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

Facility: AVOYELLES WOMEN'S CORRECTIONAL CENTER

Date: 3/1/2023

Name of Program: FDIC MONEY SMART MANAGEMENT

Date of Program Implementation: 10/2014

Primary Area of Service Provided:

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

Program has been certified by DPS&C? Yes No

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

Has program curriculum changed during preceding 12 months? Yes No

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

Detailed records are maintained on the following:

- All offenders who apply. Yes No
- Number of offenders accepted. Yes No
- Number and type of services provided. Yes No
- Offender's completion/termination from program. Yes No

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

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

Lt. Col. Furr

3-2-23

Monitoring Team Member or BJG Team Member/Leader

Date