

Department of Public Safety & Corrections
State of Louisiana

JOHN BEL EDWARDS
GOVERNOR

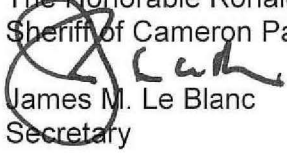


JAMES M. LE BLANC
SECRETARY

May 15, 2023

MEMORANDUM

TO: The Honorable Ronald Johnson
Sheriff of Cameron 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 Cameron Parish Jail on February 8, 2023 and a follow-up visit on March 1, 2023.

During the walk through of the facility the BJJ Team made several recommendations and/or comments:

- The chemical room inventory issues have improved, and the room was organized. There are inventories present for the chemicals, but inventories are incorrect on the balances. Several MSDS sheets missing.
- The outdoor recreation area is in need of cleaning (pressure washing of the surfaces).
- Kitchen - Products need to be dated and placed 6" from walls in the kitchen. Maintain a more accurate log of temperature controls.
- PREA - A new PREA officer needed. Suggest PREA training be conducted by an outside agent.
- Have the parish complete repair of the pre-existing issue in the DOC dorm ceiling.
- Maintain better security of the control room, allowing officers only in the area, and securing the entrance/exit at all times.
- Conduct regular physical counts. Do not rely solely on cameras for counts.
- Clean urinals on a regular basis and remove excessive hygiene products from windowsills to reduce clutter.
- Suggest use of a sick call form request instead of the current verbal notification only.

DPS&C would like to encourage continued compliance and improvements with all guidelines. If at any time assistance is needed from DPS&C do not hesitate to reach out. At this time DPS&C will return in 90 days from the date of this memorandum to ensure compliance and improvements

with all guidelines.

Thank you for your support of the BJJ process.

JML/mwk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association
David French, Warden, Cameron Parish Jail
Seth Smith, Chief of Operations
E. Dustin Bickham, Warden, DCI
Selten Manuel, BJJ Team Leader



BJG MONITORING REPORT

___ Annual __X_ Semi-Annual, ___ Quarterly ___ Monthly ___ Recert with Waiver

Rev. 03/22/2022 mw

Facility Name: Cameron Parish Jail
BJG Team Leader & Monitors: Major Selten Manuel and Captain Craig Pearce
Facility Warden & Email Address: Warden David French (dfrench@cameronparishso.org)
Facility Staff: Assistant Warden Chelsie Skero (cskero@cameronparishso.org)
BJG Inspection Date: February 8, 2023 (Follow up inspection conducted on March 1, 2023)
Previous BJJ Inspection Date: May 5, 2022
Operational Capacity: 65
Count on Day of Visit: 19

Concerns or Issues from the previous BJJ Monitoring Inspection:

Chemical room inventories and organization
 Repairs needed in DOC dorm on ceiling
 Overall cleanliness of the living areas, common areas, and bathrooms

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	3	0	3
Number of Local Offenders	14	2	16
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	17	2	19

Number of DOC Offenders that are:

Single Bunked 0

 Double Bunked 3

 Triple Bunked 0

Total **3**

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

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
January 2022	0	0	0	0	0
February 2022	0	0	0	0	0
March 2022	0	0	0	0	0
April 2022	0	0	0	0	2-saved food items from meals
May 2022	0	0	0	0	3-disposable razors
June 2022	0	0	0	0	0
July 2022	0	0	0	0	0
August 2022	0	0	0	0	0
September 2022	0	0	0	0	0
October 2022	0	0	0	0	0
November 2022	0	0	0	0	3-food items
December 2022	0	0	0	0	0

GENERAL APPEARANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:

Living Area: Generally clean and free from odors or clutter

- **Dorms** – Dorms are clean, odor-free and in orderly condition. All personal property picked up at time of inspection. Excess mattresses were present in two (2) DOC dorms.
- **Cell Block** – Clean, odor-free, and in orderly condition

Kitchen: Clean, odor-free and in orderly condition. Temperature logs and utensil inventories were present, though not entirely accurate. Products need to be dated and placed 6" away from walls. Upon follow up, state of inventories was improving. Additional suggestions made to ensure continued improvements.

Bathrooms: Urinals and outside wall of bathroom in need of cleaning, otherwise, in orderly condition. Hot/cold water accessible throughout living and common areas. An excessive amount of hygiene products in windowsills.

Yard Areas: Offenders have access to recreation areas. Recreation areas in need of cleaning.

Maintenance: There is still a hole located in the ceiling of the DOC dorm that was present at the time of our May 2022 inspection. All maintenance issues are addressed by the parish.

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

- I-A-001** **Safety/Sanitation/Inspections: Compliant** – Inspection rounds conducted by staff on a daily basis. Evacuation routes posted throughout the facility. Louisiana State Fire Marshal (Inspection date – 10/12/2022) and Louisiana State Department of Health and Hospitals (Inspection date – 02/08/2023) inspections are current.
- I-C-001** **Emergency Plan: Compliant** – The emergency plan currently in process of update. Someone currently working at the facility will be assigned safety/emergency plan responsibilities. Evacuation routes posted in hallways.
- II-A-007** **Counts: Compliant (after follow up inspection)** – Upon initial inspection, control could not show where current day counts conducted. Officer stated they had not conducted counts today or yesterday. **Plan to return in 30 days to verify counts are taking place properly. Upon follow up inspection, count procedure and documentation has improved. Explained how the officers need to “see flesh” when conducting counts.**
- How many formal counts are conducted each shift? 4 (this is the number that should be taking place per Warden’s statement)
 - How many counts are conducted each day? 8 (this is the number that should be taking place per Warden’s statement)
 - **Stick outs counts** are counts conducted in areas other than housing units, such as food services and other areas of normally authorized locations. When conducting and submitting the counts, employees need to physically see the offender before turning in these counts. Explained that officers are to go into the kitchen or laundry to physically count each offender.
 - How does the facility accomplish this?
Officer stated they count them via the cameras **(Will follow up in 30 days to ensure physical counts done correctly and regularly.)** Upon follow up inspection, offenders counted in immediate physical presence, and counts are documented.
 - Does this process insure accountability and safe/secure operation of the facility?
No. Offenders are to be counted in visual physical presence, in addition to a camera count, if the facility chooses to utilize the cameras for counts. **Physical counts MUST be done. Upon follow up inspection, offenders counted in immediate physical presence, and counts are documented.**
- II-A-008** **Offender Population Management System: Compliant** – Documentation maintained on every DOC offender. Offender transferred if he does not work out well at the facility. All offender daily activity logged in office for day/night shifts.
- II-A-010** **Admissions: Compliant** – Admission policy/procedure established and all admission forms completed upon arrival at facility. Offenders issued an ID card, and given a copy of the rulebook. Offender personal property searched and inventoried.
- II-A-012** **Classification System: Compliant** – A review conducted of offender’s length of sentence and offenses to determine eligibility for this facility. Offenders arrive at facility with trustee status.
- Does this facility have any trustees that work outside the secure perimeter? Yes
- If yes, where? Trustees perform maintenance and clean up at various locations in the parish
- **What is their classification process to determine who is eligible for trustee status?**

DOC offenders' status and offense(s) reviewed upon intake. Assigned to work at the facility to begin with, and then assigned to road crew after a period of observation. Offenders not meeting criteria for medium custody are not eligible for housing at this facility.

- **Does their classification process meet DPS&C, Corrections Services' criteria?**
Yes

- II-A-019** **Offender Transfers: Compliant** – Offenders transferred in accordance with policy and procedure outlined by DPS&C
- II-A-020** **Frequency of Cell Checks: Compliant (after follow up inspection)** – Policy states cells checked every 30 minutes, but needs notation in logbooks to document actual rounds made. Upon initial inspection, officers cannot show where this done. **Follow up visit to check logbooks in 30 days. Upon follow up inspection, logbook documentation maintenance and compliance has improved. Rounds conducted and documented at required intervals.**
- II-B-002-1** **Use of Restraints for Pregnant Offenders: Compliant** – No female DOC offenders present at time of inspection. Pregnant female DOC offenders transferred out as soon as possible. No restraints used on pregnant offenders.
- II-C-001** **Procedures for Searches: Compliant** - The facility conducts daily and random searches on offenders coming in and going out of the facility. Dorms and common areas searched on a daily basis.
- II-D-001** **Key, Tool, and Utensil Control: Compliant** – All items accounted for and inventories correctly logged. Upon follow up inspection, some utensils had been replaced and need to be numbered to reflect accurately on inventory.
- III-A-001** **Rules and Discipline:** Facility not responsible for these procedures. Offender transferred and restoration of good time requested from and determined by DOC.
- Does the facility's offender orientation include the application process for applying for restoration of good time? Yes. Offender submits an application for restoration of good time. If approved, he is transferred out to accomplish this.
 - What is their restoration of good time application process for the offender population? Offender is transferred out
 - Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes
- IV-C-001** **Access to Care/Clinical Services** (Does the facility charge a co-payment? Approved by DPS&C?) **Compliant** – The facility does not charge a co-pay for care or clinical services. Health care accessible to offenders through South Cameron Memorial Hospital.
- IV-C-006-1** **Pregnancy Management: Compliant** – A pregnant local offender transferred out before time of inspection. Pregnant DOC offenders transferred out ASAP.
- IV-C-008** **Annual TB Testing: Compliant** – Only one TB screening conducted on offenders upon intake.
- IV-C-012** **Access to Sick Call: Compliant** - Offenders verbally notify staff of illness and seen by the medical staff at South Cameron Memorial Hospital. Made suggestion to use a sick call request form.
- IV-C-013** **Infirmiry Care: Compliant** - No infirmiry on site at facility. First aid kit is accessible for minor medical needs.

- IV-C-013-1** **Medical Releases: Compliant – Compliant** – Conducted only through transfer. No medical releases occurred since last inspection.
- IV-C-014** **Suicide Prevention and Intervention: Compliant** – Offenders evaluated by mental health provider to determine needs or treatment. Offender placed on suicide watch at the local hospital. (South Cameron Memorial Hospital). Suicide logs are maintained when placed on suicide watch.
- IV-C-016** **Notification: Compliant** – No offenders admitted to an ICU or trauma center since last inspection.
- IV-D-004** **Confidentiality of Health Information: Compliant** – Only necessary medical facility staff at South Cameron Memorial Hospital have access to an offender's personal medical information
- IV-E-001** **Alleged and Substantiated Sexual Assaults: Compliant** – All PREA allegations referred to an investigator as soon as reported. There have been no allegations since the last inspection. Suggest PREA training be conducted by an outside agent.

- V-A-003** **Programs and Services: Complaint** – None offered at this time
 - List all Certified Treatment Programs (Attach Form IS-B-8-b)
 - List all other Offender Programs (the following programs are available upon request, however, no offenders have requested to participate in the programs since last inspection)
 - Alcoholics anonymous (AA)
 - GED

V-A-003-1 Educational Programming

GED Program (no requests made by offenders to participate)

Number of GED Slots	8
Number of Participants	0
YTD Number of Completions	0

- V-B-001** **Releasing Offenders: Compliant** – After a thorough review of documentation received from DOC, offenders released with their personal property and two forms of identification.
- V-B-010** **Proposed Expansions: Compliant** – No proposed expansions scheduled at time of inspection
- V-C-001** **Substance Abuse Programs: Compliant** – Alcoholics Anonymous offered at this facility at time of inspection
- V-C-002** **Reentry Programs (Are offenders releasing with two valid forms of identification?) Compliant** – No re-entry programs offered at this facility. Offenders released with two (2) valid forms of identification. Offenders transferred to participate in re-entry programs.
- V-C-004** **Parole Board Procedures: Compliant** – In-person parole hearings not held at this facility, however, hearings held via Zoom.
- VI-B-002** **Grievance Process: Compliant** – A grievance process established at the facility. No grievances filed since last inspection
 - Does grievance process include at least two levels of review? Yes (Assistant Warden-Warden)

- Who is the designee at each level of review? Assistant Warden Skero, advanced to Warden French, then to Chief of Police
- What is the specified time for response at each level? 15 days at each level

VII-A-002 Weapons Training: Compliant - Weapons training conducted four (4) times annually

VII-B-008 Monthly Reporting: Complaint – Monthly reports are submitted in a timely manner. No issues of major significance to note in monthly reporting.

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
January 2022	1	6	16%	0
February 2022	1	6	16%	0
March 2022	1	5	20%	0
April 2022	1	5	20%	0
May 2022	1	5	20%	0
June 2022	1	5	20%	0
July 2022	1	5	20%	0
August 2022	1	9	11%	0
September 2022	1	8	12.5%	0
October 2022	1	8	12.5%	0
November 2022	1	9	11%	0
December 2022	1	9	11%	0

Mandatory Areas of Review for BJJ Compliance

I-A-001 Safety/Sanitation/Inspections (MANDATORY) – Compliant – Inspections are made daily by staff. State Fire Marshal report is current (dated 10/12/2022), having no deficiencies noted. DHH inspection is current (dated 02/08/2023), noting one critical item and two non-critical items corrected on site at time of inspection.

I-C-001 Emergency Plan (MANDATORY) – Compliant - All staff members properly trained on the established emergency plan approved by DPS&C. The emergency plan currently being updated at time of inspection.

I-C-003 Fire Safety/Code Conformance (MANDATORY) – Compliant - Facility compliant with the requirements of the state fire marshal and State Fire Marshal inspection report is current (dated 12/12/2022). All violations, if any, corrected ASAP and submitted as corrective action.

II-A-007 Counts (MANDATORY) – Compliant (after follow up inspection) – Count procedure established, however logs not maintained and procedure not followed. Offenders counted via camera ONLY. Offenders required to be counted in visual physical presence. Use of camera visual feed as aid to counting procedure acceptable, but should not be the sole and primary form to obtain visual count.

II-A-016 Photo Identification (MANDATORY) – Compliant – All offenders provided a photo identification upon intake at the facility

II-A-018 Offender Drug Testing (MANDATORY) – Compliant – Offenders drug tested monthly in accordance with requirements outlined by DPS&C. Documentation and records maintained.

- III-A-001 **Rules and Discipline (MANDATORY) – Compliant** – Offenders given a DOC rulebook consisting of facility and disciplinary rules upon intake at orientation

- IV-A-003 **Food/Dietary Allowances (MANDATORY) – Compliant** – Facility menus meet required recommendations and required documentation recorded and maintained. Offenders fed three (3) meals daily, and no specific diets required for offenders at time of inspection.

- IV-A-006 **Food Service Management (MANDATORY) – Compliant** - Written policy and procedure established and documented, maintained on file by the Warden.

- IV-B-001 **Plumbing Fixtures - Toilets and Washbasins (MANDATORY) – Compliant** – Accessible facilities (including hot/cold running water) available to offenders and maintenance records documented and maintained on file. All facilities operational at time of inspection. Handicap accessible facilities available in compliance with ADA.

- IV-B-002 **Plumbing Fixtures - Showers (MANDATORY) – Compliant** – Accessible facilities (including hot/cold running water) available to offenders and maintenance records documented and maintained on file. Showers clean and odor free at time of inspection. Handicap accessible facilities available in compliance with ADA.

- IV-B-005 **Personal Hygiene (MANDATORY) – Compliant** – Established policy and procedure for procurement of hygiene items is in practice. Hygiene issued to offenders on a bi-weekly basis.

- IV-C-001 **Access to Care/Clinical Services (MANDATORY) – Compliant** - Offenders receive information on accessing health care services and co-pay (if applicable) information upon orientation. Approval obtained from DPS&C for any major illness or injury.

- IV-C-002 **Adequate Equipment and Supplies (MANDATORY) – Compliant** – First aid supplies obtainable to those in need of immediate minor medical supplies. All required immediate first aid equipment/supplies in good condition/working order.

- IV-C-005 24 **Hour Care (MANDATORY) – Compliant** – An emergency care policy and procedure is established. South Cameron Memorial Hospital utilized in the event of a major immediate medical need not likely to be resolved at the facility.

- IV-C-009 **Chronic Care Program (MANDATORY) – Compliant** - Facility in compliance with policy/procedure for caring for offenders with chronic conditions. A chronic care case sent to South Cameron Memorial Hospital, and then transferred out.

- IV-C-012 **Access to Sick Call (MANDATORY) - Compliant** – Facility is in compliance making sick call available to offenders in accordance with DPS&C policy and procedure. Services provided by South Cameron Memorial Hospital.

- IV-C-014 **Suicide Prevention and Intervention (MANDATORY) – Compliant** – Approved written policy and procedure established for suicide prevention/intervention. Implementation training for staff conducted annually in accordance with DPS&C requirements. If an offender placed on suicide watch, he is monitored at South Cameron Memorial Hospital until transferred out ASAP.

- IV-C-015 **Offender Deaths (MANDATORY) – Compliant** - Notifications conducted in accordance with approved written policy and procedure. Reporting and documentation completed and maintained on file in compliance with

requirements outlined by DPS&C. No deaths reported since last inspection.

- IV-D-007 Internal Review/Quality Assurance (MANDATORY) – Compliant** – Management of potential major risk events identified and evaluated on a regular basis to prevent future occurrences and be aware of management of future major risk event. Offenders interviewed at time of inspection stated no issues or complaints to speak of.
- V-A-005 Exercise and Recreation Access (MANDATORY) – Compliant** – Offenders granted access to adequate recreation areas, weather permitting. The facility recreation yard is an outdoor fenced area.
- VI-B-002 Grievance Process (MANDATORY) – Compliant** – Offenders have reasonable access to a grievance remedy procedure. Offenders receive responses in a reasonable recommended amount of time and remedies, when appropriate. No grievances to report since last inspection.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS: Staff morale good. There are new officers that will make exceptional employees when properly trained.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE: Interviewed offenders. Offenders had no complaints to report.

RECOMMENDATION:

- The chemical room inventory issues have improved, and the room was organized. There are inventories present for the chemicals, but inventories are incorrect on the balances. Several MSDS sheets missing.
- The outdoor recreation area is in need of cleaning (pressure washing of the surfaces).
- Products need to be dated and placed 6" from walls in the kitchen. Maintain a more accurate log of temperature controls.
- PREA: A new PREA officer needed. Suggest PREA training be conducted by an outside agent.
- Have the parish complete repair of the pre-existing and current holes in the DOC dorm ceiling.
- Maintain better security of the control room, allowing officers only in the area, and securing the entrance/exit at all times.
- Conduct regular physical counts. Do not rely solely on cameras for counts.
- Clean urinals on a regular basis and remove excessive hygiene products from windowsills to reduce clutter.
- Suggest use of a sick call form request instead of the current verbal notification only.

This concludes the semi-annual inspection conducted on February 8, 2023 and the follow up inspection conducted on March 1, 2023 by Major Seltan Manuel and Captain Craig Pearce at the Cameron Parish Jail.

Based on the review and inspection of the facility, it is my recommendation the Cameron Parish Jail continue with semi-annual inspections under waiver status.



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-22-030052-1

No Deficient/Cautionary Codes cited.

Location Information			
Inspection Type	Compliance Building Inspection	Inspection Date	10/12/2022 9:59:58 AM
Structure ID	214946	No. of Buildings	6
Capacity	75	Facility Code	J537
		Year Built	2013
		Construction Type	Type IIA / (111)
Building/Trade Name		Address	
CAMERON SHERIFFS OFFICE - CORRECTIONAL CENTER		124 RECREATIONAL CENTER LANE, CAMERON, LA 70631	

Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	DAVID FRENCH	(337) 796-1289	DFRENCH@CAMERONSO.ORG
Address			
, CAMERON, LA 70631			

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 AT THE TIME OF INSPECTION. IN COMPLIANCE.

Inspector Information		
Name: Wei Lin	Badge Number: 737	Inspector Signature:

Person to whom requirements were explained		
Name: James Gaspard	Title: Maintenance	Signature:

For questions regarding the contents of this report, please call: (800) 554 0006

R. S. 40: 1621 Whoever fails to comply with any order issued by the Fire Marshal or his authorized representative under any provision of Part III, Chapter 7, Title 40 of the Louisiana Revised Statutes of 1950, R.S. 40:1569 excepted, shall be fined not more than five hundred dollars or imprisoned, for more than six months or both. Each day's violation of an order constitutes a separate offense and may be punished as such at the discretion of court.



John Bel Edwards
GOVERNOR

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-22-030052-1

No Deficient/Cautiounary Codes cited.

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



Daniel H. Wallis
FIRE MARSHAL

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

RULES FOR APPEALING TO THE FIRE MARSHAL BOARD OF REVIEW

- I. Any application to the Board of Review shall contain the following basic information set off in organized fashion with captions indicating that the paragraph in question contains the following basic information.
 1. The name of the applicant.
 2. A brief description of the facts.
 3. A copy of the order of the Fire Marshal which is being appealed.
 4. A reference to the section of the law or code being reviewed.
 5. A brief description of why the applicant feels the requirements of the Fire Marshal is not within the Fire Marshal's authority, or brief description of why the interpretation of the Fire Marshal is incorrect or what specific relief is required by the applicant.
 6. A list of the individuals who will be appearing before the Board, and a brief description of the testimony or information they will be providing the Board.
 7. A list of all the documents which will be introduced or provided to the Board along with a brief description of the documents, and if possible, a copy of said documents.
 8. A list of each exhibit except for documents, and a brief description of the exhibit.
- II. Whenever possible, a notice of the meeting, date and place, and the agenda will be recorded in the Louisiana Register, however, whenever that is not possible, a copy of the meeting notice including the date, time and place, and agenda of the meeting of the Board will be published in the official notices of the official state journal; furthermore, a press release containing the same information will be mailed to the official journals of the cities of Shreveport, Monroe, Lafayette, Lake Charles, Alexandria, New Orleans, and Baton Rouge and any city or town in which the meeting of the Board is to be held if it is not one of the aforementioned major cities; and the same information shall be mailed to each individual who has notified the Fire Marshal of his desire to receive a notice of such appeal.
- III. A copy of the determination of the Board as prepared by the Chairman will be mailed to each individual who requests a copy of that specific determination as well as to the applicant.
- IV. The time delays for filing an appeal shall be those specified in R.S.40:1577 and 40:1578 1 D.



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

**Retail Food
Notice of Violations**

Routine/Renewal

Permit Number 12-0001015-1	Permit Name CAMERON PARISH POLICE JURY (JAIL) SITE		
Name of Establishment CAMERON PARISH POLICE JURY (JAIL)	Owner Name CAMERON PARISH POLICE JURY		
Address 119 SMITH CIR. CAMERON, LA 70631	Date 02/04/2020	Time 01:30 PM	

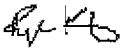

LAC TITLE 51 PART XXIII

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 - 1501.1 - Food is not stored in a clean, covered container. [COS]
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3705	107 - 3705.3 - Lighting intensity in areas where employees are working with unpackaged potentially hazardous food, or knives, slicers, grinders, etc. is not at least 50 foot candles. (under hood)

Comments:

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 food establishment 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. Establishments 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 Ryan King	Phone # 337-475-3237	Sanitarian Signature 	R.S. # 1492
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 David French		Signature of Recipient 	

STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH INSTITUTION REPORT					
Agency License No. N/A	Anniversary Month JULY				
Name of Establishment CAMERON PARISH JAIL-224	Mailing Address				
Address 119 SMITH CIR					
City, state, Zip Code CAMERON LA 70631					
Type of Facility JAILS 22					
Parish Cameron	Date Inspected 02/02/2023				
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.					
RYAN KING	<table border="1"> <tr> <td>1</td> <td>4</td> <td>9</td> <td>2</td> </tr> </table>	1	4	9	2
1	4	9	2		
LHS 48 (R 7/99) D 1014					