Department of Public Safety & Corrections

State of Louisiana

JOHN BEL EDWARDS Governor



JAMES M. LE BLANG Secretary

May 15, 2023

MEMORANDUM

- TO:The Honorable Stephen WilliamsSheriff of Lincoln ParishFROM:James M. Le BlancSecretary
- RE: "Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection that was conducted at Lincoln Parish Detention Center on March 21, 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 John Driskill, Warden, Lincoln Parish Detention Center Seth Smith, Chief of Operations Jerry Goodwin, Warden, DWCC James Arnold, BJG Team Leader



BJG MONITORING REPORT

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

Rev. 08/01/2022 mwk

| Facility Name: | Lincoln Parish Detention Center |
|----------------------------------|--|
| BJG Team Leader & Monitors: | Colonel James Arnold, BJG Team Leader |
| Facility Warden & Email Address: | John Driskill, jdriskill@lincolnparish.org |
| Facility Staff: | Sara Knox, sknox@lincolnparish.org |
| BJG Inspection Date: | March 21, 2023 |
| Previous BJG Inspection Date: | April 21, 2022 |
| Operational Capacity: | 337 |
| Count on Day of Visit: | 309 |

Concerns or Issues from the previous BJG Monitoring Inspection:

| | # MALE | # FEMALE | TOTAL |
|----------------------------------|--------|----------|-------|
| Number of DOC Offenders | 118 | 6 | 124 |
| Number of Local Offenders | 162 | 23 | 185 |
| Number of Out of State Offenders | 0 | 0 | 0 |
| Number of Federal Offenders | 0 | 0 | 0 |
| Number of ICE Detainees | 0 | 0 | 0 |
| TOTAL | 280 | 29 | 309 |

Number of DOC Offenders that are:

| Single Bunked | 1 |
|---------------|-----|
| Double Bunked | 122 |
| Triple Bunked | 0 |
| Total | 123 |

Number of DOC Offenders that are in Restricted Housing:

| Single Bunked | 1 |
|---------------|---|
| Double Bunked | 0 |
| Triple Bunked | 0 |
| Total | 1 |

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

| Month/Year | Off/Off | Off/Off w/sig inj | Offender/Staff | Off/Staff w/sig inj |
|------------|---------|-------------------|----------------|---------------------|
| May 2022 | 0 | 0 | 0 | 0 |
| June 2022 | 1 | 0 | 0 | 0 |
| July 2022 | 0 | 0 | 0 | 0 |
| Aug 2022 | 1 | 0 | 0 | 0 |
| Sept 2022 | 1 | 0 | 0 | 0 |
| Oct 2022 | 0 | 0 | 0 | 0 |
| Nov 2022 | 1 | 0 | 0 | 0 |
| Dec 2022 | 1 | 0 | 0 | 0 |
| Jan 2023 | 1 | 0 | 0 | 0 |
| Feb 2023 | 0 | 0 | 0 | 0 |

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

| ι J | | | | | | |
|------------|----------------------|---------|--------|------------|-------|--|
| Month/Year | Illicit Substance | Alcohol | Weapon | Cell Phone | Other | |
| May 2022 | 2 | 0 | 0 | 0 | 0 | |
| June 2022 | 3 | 0 | 0 | 0 | 0 | |
| July 2022 | 0 | 0 | 0 | 0 | 0 | |
| Aug 2022 | 0 | 0 | 2 | 0 | 0 | |
| Sept 2022 | 0 | 0 | 0 | 0 | 0 | |
| Oct 2022 | 0 | 0 | 2 | 0 | 0 | |
| Nov 2022 | 1 | 0 | 0 | 0 | 0 | |
| Dec 2022 | 2 | 0 | . 1 | 0 | 0 | |
| Jan 2023 | 0 | 0 | 0 | 0 | 0 | |
| Feb 2023 | 0 | 0 | 1 | 0 | 1 | |

GENERAL APPERANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:

Living Area:

- Dorms Dorms were clean and orderly. Offender's personal property was properly stored in their assigned lockers.
- **Cell Block** Cellblocks were clean and orderly. There was 1 DOC offender housed in the cellblock on the day of inspection.

Culinary/Dining: Culinary/dining area was clean. Offender's receives a pre-assessment prior to their kitchen assignment. Temperature logs were being maintained on cooler and freezers. Tool / utensil inventories were checked. A good check-out system were in place with an accurate inventory. DHH Retail food inspection was conducted on 1/12/23.

Bathrooms: Bathrooms were clean and orderly and in good working order on the day of inspection.

Yard Areas: Yard area was clean and free of debris. Ample space for offender's to exercise.

Maintenance: A review of tools reveal an accurate inventory with a good check-out system in place. All tools were engraved to reflect current inventory.

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

I-A-001 Safety/Sanitation/Inspections (MANDATORY): Compliant - Weekly / Monthly inspection are conducted at the facility. Kitchen inspection are on file as well as water temperature logs. Checklist reveals that all areas of the facility are being checked in accordance with the guidelines.

- **I-C-001 Emergency Plan (MANDATORY):** Compliant- Facility has an approved plan in place. Documentation of training for staff are on file.
- I-C-003 Fire Safety/Code Conformance (MANDATORY): Compliant- Last FM Inspection was on 3/10/23 with no deficiencies noted.
- **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 were on file.
- **II-A-007 Counts (MANDATORY):** Compliant Written policy and procedures are in place. Six formal counts are conducted during a 24 hour period.
 - How many formal counts are conducted each shift? Day shift 3, Night shift 3
 - How many counts are conducted each day? 6
 - <u>Stick outs counts</u>
 - How does the facility accomplish this? Staff conducts visual counts according to policy. Documentation were 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 are in place for offender case management. Offender files are transferred with offender to local or DPS&C facility.
- **II-A-010** Admissions: Compliant- Appropriate forms are completed and 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 or No) Yes

lf 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 BJG monitoring visit.)

| Month/Year | # DOC Tested | Total DOC Pop | % Tested | # Positive |
|------------|--------------|---------------|----------|------------|
| May 2022 | 49 | 117 | 41.8 % | 1 |
| June 2022 | 36 | 117 | 30.8 % | 0 |
| July 2022 | 16 | 107 | 15 % | 0 |
| Aug 2022 | 35 | 113 | 11.5 % | 0 |
| Sept 2022 | 40 | 113 | 35.4 % | 0 |
| Oct 2022 | 31 | 104 | 29.8 % | 1 |
| Nov 2022 | 40 | 120 | 33.3 % | 0 |
| Dec 2022 | 35 | 108 | 32.4 % | 0 |
| Jan 2023 | 32 | 98 | 32.7 % | 0 |
| Feb 2023 | 27 | 98 | 27.6 % | 0 |

- **II-A-019 Offender Transfers:** Compliant- Policy and procedures are in place and facility logs are maintained to reflect offender transfers.
- **II-A-020 Cell Checks (MANDATORY):** Compliant- Policy and procedures are in place and were on file. Cell checks are conducted and are within the guidelines.
- **II-B-002-1 Use of Restraints for Pregnant Offenders:** Compliant- Facility has policy and procedures in place and documentation reflects the use of restraints on female offenders.
- **II-C-001 Procedures for Searches:** Compliant- Policy and procedures are in place. Documentation of shakedowns of dorms and cellblocks are 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 a good check-out system.
- 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? Offender request through classification, classification will review offender request to make sure all information is accurate and then forward to the Warden for his review. If all information is accurate it is forwarded to DOC for processing.
 - 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 each 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 are not able to purchase such items.
- IV-C-001 Access to Care/Clinical Services (MANDATORY) (Does the facility charge a co-payment? If so, approved by DPS&C?): Compliant- co-pay is 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. Michael Shane Phillips exp. 2/29/24, Dr. Rhonda Pruitt for dental exp. 12/31/24.
- **IV-C-005 24 Hour Care (MANDATORY):** Compliant- When offender medical needs are not meet at the facility Northern Louisiana Medical Center will be utilized along with Ochsner LSU Health- Monroe La.
- **IV-C-006-1 Pregnancy Management (MANDATORY):** Compliant- Policy and procedures are in place to accommodate pregnant 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 Monday thru Friday. Offenders have access to 24 hour emergency care by the on call nurse.
- **IV-C-013** Infirmary Care: Compliant- Provisions are made to provide 24 hour care with physician, dentist and mental health professional.
- IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): 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- Policy has been approved by Dr. Shane Phillips. Documentation is on file to support staff training on prevention and intervention.
- IV-C-015 Offender Deaths (MANDATORY): Compliant- No offenders death 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. Facility utilizes Narcan and staff training is 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: Volunteers are utilized for religious programs.
- V-A-005 Exercise & Recreation Access (MANDATORY): Compliant- Offenders are allowed access to recreation daily with weather permitting.

V-B-001 Programs and Services:

- List all Certified Treatment Programs (Attach Form IS-B-8-b) Understanding & Reducing Angry Feelings Partners in Parenting Louisiana Risk Management Phase 1&2 Thinking for a Change
- List all other Offender Programs - FDIC Money Management 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: N/A
- V-C-001 Releasing Offenders: Compliant- Personal property of offenders are returned along with obtaining a signed receipt. Medical ensures that offenders receive any required medication. Offenders releasing from the facility receive information on community resources.
- V-C-002 Regional Reentry Programs (Are offenders releasing with two valid forms of identification?): Yes
- V-C-004 Parole Board Procedures: Compliant- Written policy and procedures are in place. Documentation present showing facility Warden or designee are present during parole boards.

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? 1st level Deputy Warden, 2nd level is the Warden.
- What is the specified time period for response at each level? 1st level 40 days, 2nd level 20 days.
- VII-A-002 Weapons Training: Certificate on file to show completion of initial and annual training.
- VII-B-010 Monthly Reporting: Monthly reports are submitted on time each month.
- VII-B-012 Proposed Expansions: No plans for expansions.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff morale at Lincoln Parish Detention Center deemed to be good on the day of inspection. Staff were dressed appropriately and each staff member had identification on their person. Staff members were very knowledgeable of their job duties and aware of the emergency procedures. All staff that I came into contact with were eager to assist with the audit as needed.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

Offender morale and quality of life deemed to be good. The offenders that were interviewed during the walk-through voiced no negative comments. Each offender stated they were aware of the sick call process and how to file a grievance.

RECOMMENDATION:

Warden Driskell and his staff continually strive to remain compliant with the Basic Jail Guidelines. The facility operates in a smooth and efficient manner. Based on my walk-through inspection of the facility and review of the BJG files, it is my recommendation that Lincoln Parish Detention Center remains on an annual monitoring.

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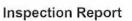
Humphrey - LSA Emails 0003248.08



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



Report # CB-22-033573-1

No Deficient/Cautionary Codes cited.



Daniel H. Wallis FIRE MARSHAL

| | | Lo | cation | n Inform | ation | | | |
|--|--------------------------------|---------------------------------------|--------|---------------|-------|-----------------|--------------------|---------------------------------------|
| Inspection Typ | e Compliance | Building Inspection | | 1 10 00 | 1 | Inspection Dat | te <mark>3/</mark> | 10/2023 1:54:57 PM |
| Structure ID | 18840 | No. of Buildings 1 | | Facility Code | J1 | 165 | | |
| Capacity | 364 | Year Built | | 1988 | 1 | Construction | Туре Ту | /pe IIA / (111) |
| Building/Trade Name Add LINCOLN PARISH DETENTION CENTER / MAIN BLDG. ROA | | | | | | ROAD, RUSTO | DN, LA 712 | 70 |
| | | 0 | wner | Informa | tion | | - | |
| Owner Type | | Name | mer | monne | | act Phone | Contact I | Email |
| Municipal Proje | cl | LINCOLN DETENTIO | N CEN | ITER | | 255-4440 | | L@LINCOLNPARISH.OR |
| Address | | | | | | | | |
| LINCOLN DETE | ENTION CENTER, | RUSTON, LA 71270 | | | | 0 | | |
| | | Те | nant | Informa | tion | | | |
| Name Suite Number | | | | Floor Number | | Square Footage | | |
| | | 0 | ccupa | ancy De | tails | | | 1 |
| Occupancy Ty | pe | Details | | | | | | |
| Institutional | | INSTITUTIONAL BUIL DETENTION/CORRE | | | | | | ECTION); |
| | | | Cor | nments | | () | | |
| | DEFICIENCIES F FOR OCCUPANC | FOUND AT TIME OF IN Y | NSPEC | CTION. | | | | |
| | | Insj | pecto | r Inform | ation | ı | | |
| Name: Mark F | ranks | Badge Number: 654 | | | Inspe | ctor Signature: | - Salar | · · · · · · · · · · · · · · · · · · · |
| | | Person to whom | n requ | uiremen | ts we | ere explained | | |
| Name: Jeff Ba | gwell | Title: Facilities | | | Signa | ture: | | |

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

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



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

| Routine Renewal | | | | |
|---|-------------------------------------|-----------------|----------|--|
| Permit Number | Permit Name | | | |
| 31-01-224 | Lincoln Parish Detention Center-224 | | | |
| Name of Establishment | | Owner Name | | |
| Lincoln Parish Detention Center-224 | | | | |
| Address | | Date | Time | |
| 170 Road Camp RD Ruston, LA 71270 | | 06/02/2022 | 09:00 AM | |
| Name of Establishment Lincoln Parish Detention Center-224 Address | | Owner Name Date | | |

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
 7 - There is peeling paint on the walls in the shower. J and H Pod and Dorm 2 and Dorm 3. [Repeat]

 Lighting
 101
 28 - There is less than 20 foot-candles of lighting in the shower area. Dorm 5

Comments:

Copy of report emailed to dingles@lincolnparish.org

Paint missing on some doors throughout detention center.

| Number License 337 | Number Licensed For Number in Attendance 337 293 | | License Anniversary 06 30 2022 |
|--|---|---|-----------------------------------|
| Sanitarian Name Print James Suns | Phone # (318)251-5029 | Sannarian Signature Good-Sim | R.S. # 3180 |
| The above mentioned violations Correct Critical Violations by | were called to my attention and we | ere explained to me in detail. I hereby agree to Correct Non-Critical Violations | by |
| Encoderate Contratory on the other states | | Signature of Recipient | |
| Name Title Pam Torbor PIC | | \times | |



STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Retail Food Notice of Violations

Routine/Renewal

| Permit Number 31-0086338-1 | Permit Name LINCOLN PARISH DE | Permit Name LINCOLN PARISH DETENTION CENTER JAIL | | | | |
|--|----------------------------------|---|------------------|--|--|--|
| Name of Establishment LINCOLN PARISH DETENT | ION CENTER | | | | | |
| Address 170 ROAD CAMP RD RUST | ON, LA 71270 | Date 01/12/2023 | Time 10:15 AM | | | |

LAC TITLE 51 PART XXIII

| Category | Code Reference | Description of Violations |
|--|-------------------|--|
| UTENSILS/EQUIPMENT /SINGLE SERVICE | 2517 | 83 - 2517.9 - Single use/single service articles are not stored at least six (6) inches off the floor |
| STRUCTURAL/DESIGN /MAINTENANCE /PLUMBING | 3703 | 106 - 3703.4 - Walls/ceilings or attached equipment are not in good repair. (Paint missing on wall in ice machine room) [Repeat] |

Lincoln Parish Sheriff's Office - Corrections Division

Lincoln Parish Detention Center

Stephen Williams – Sheriff

John Driskill – Warden

P.O. Box 2028

Ruston, La 71273

Phone: 318-255-4440 Fax: 318-255-2862

February 13, 2022

Re: Health Inspection 6/2/2022 Addressing Violations

Code Ref. 101- Peeling Paint – Maintenance Supervisor Jeff Bagwell repaired and painted the walls and showers in J & H Pods and Dorm 2 & 3.

Lighting – All lighting was repaired by Maintenance Supervisor Jeff Bagwell.

Major John Driskill

Warden LPDC

Lincoln Parish Sheriff's Office - Corrections Division

Lincoln Parish Detention Center

Stephen Williams – Sheriff

John Driskill – Warden

P.O. Box 2028

Ruston, La 71273

Phone: 318-255-4440 Fax: 318-255-2862

February 13, 2023

Re: Retail Food Inspection 1/12/23 Addressing Violations

Single use/single service articles are not stored at least six inches off the floor

- Items were moved and stored six inches off the floor

.

Wall/ceilings or attached equipment are not in good repair. (Paint missing on wall in ice machine room)

- Walls and ceilings, were repainted.

Major John Driskill Warden LPDC

| Facility: Lincoln Parish Detention Center |
|--|
| Date: 3/21/23 |
| Name of Program: FDIC Money Management |
| Date of Program Implementation: January 1, 2010 |
| 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? VI Yes INO |
| Program application process is consistent with DPS&C existing assessment and classification system? X Yes I 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.YesNoNumber of offenders accepted.YesNoNumber and type of services provided.YesNoOffender's completion/termination from program.YesNo |
| Is there a formal graduation ceremony for those who complete the program? |
| 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 BJG Team Member/Leader Date |

| Facility: Lincoln Parish Detention Center |
|---|
| Date: 3/21/23 |
| Name of Program: Thinking for a change |
| Date of Program Implementation: <u>January 1</u> , 2016 |
| 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? |
| Has program curriculum changed during preceding 12 months? 🔲 Yes 🕅 No |
| Is there an objective method used to assess completion? Xes No |
| Detailed records are maintained on the following: |
| All offenders who apply.Image: Constraint of the second secon |
| Is there a formal graduation ceremony for those who complete the program? Yes Xo |
| 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 BJG Team Member/Leader Date |

| Facility: Lincoln Parish Detention Center |
|--|
| Date: $3/21/23$ |
| Name of Program: Louisiana Risk Management Model Phase IET |
| Date of Program Implementation: January 1, 2011 |
| 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.YesNoNumber of offenders accepted.YesNoNumber and type of services provided.YesNoOffender's completion/termination from program.YesNo |
| 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 BJG Team Member/Leader Date |

| Facility: Lincoln Pansh Detention Center | |
|---|-------------|
| Date: 3/21/23 | |
| Name of Program: Partners In Parenting | |
| Date of Program Implementation: <u>Unnuary 1, 2016</u> | |
| 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 cla system? 🕅 Yes 🔲 No | ssification |
| 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.Image: Constraint of the second secon | |
| Is there a formal graduation ceremony for those who complete the program? | No No |
| The CTRP referenced above continues to meet necessary criteria to maintain its certificat Department of Public Safety and Corrections. | tion by the |
| Monitoring Team Member or BJG Team Member/Leader Date | |

| Facility: Lincoln Parish Detention Center |
|---|
| Date: 32123 |
| Name of Program: Understanding E, Reducing Angry Feelings |
| Date of Program Implementation: Uanuary 1, 2016 |
| 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.Image: Constraint of the service |
| 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 BJG Team Member/Leader Date |