Department of Public Safety & Corrections

State of Louisiana



JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC SECRETARY

June 15, 2023

MEMORANDUM

TO:

The Honorable Mike Tubbs

Sheriff of Morehouse 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 Morehouse Parish Detention Center on April 12, 2023. The facility continues to provide a secure, safe, and stable environment for DOC offenders 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 Trevor Willhite, Warden, Morehouse Parish Detention Center Seth Smith, Chief of Operations Jerry Goodwin, Warden, DWCC James Arnold, BJG Team Leader



BJG MONITORING REPORT

Annual

Rev. 08/01/2022 mwk

Facility Name:

Morehouse Parish Detention Center

BJG Team Leader & Monitors:

Colonel James Arnold, (BJG Team Leader)

Facility Warden & Email Address: Trevor Wilhite, (twilhite@mpso.net)

Facility Staff:

Chief Issac Brown

BJG Inspection Date:

April 12, 2023

Previous BJG Inspection Date:

June 22, 2022

Operational Capacity:

272

Count on Day of Visit:

202

Concerns or Issues from the previous BJG Monitoring Inspection:

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	199	0	199
Number of Local Offenders	3	0	3
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	202	0	202

Number of DOC Offenders that are:

Single Bunked			
Double Bunked	192		
Triple Bunked	0		
Total	192		

Number of DOC Offenders that are in Restricted Housing:

Single Bunked	0
Double Bunked	7
Triple Bunked	0
Total	7

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
June/2022	4	0	0	0
July/2022	0	0	0	0
Aug/2022	0	0	0	0
Sept/2022	0	0	0	0
Oct/2022	0	0	0	0
Nov/2022	0	0	0	0
Dec/2022	0	0	0	0
Jan/2023	1	0	0	0
Feb/2023	0	0	0	0
Mar/20230	1	0	0	00

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

Month/Year	Illicit	Alcohol	Weapon	Cell Phone	Other
	Substance				
June/2022	0	0	0	1	1-mojo
July/2022	0	0	0	0	2-cigs,lighter
Aug/2022	0	0	0	0	3-mojo,tabacco
Sept/2022	1-marj	0	0	0	2-green leafy
					substance
Oct/2022	0	0	0	0	0
Nov/2022	0	0	0	0	4-
					tabacoo,green
					leafy substance
Dec/2022	2-green leafy	0	0		5-tabacco,
	substance				lighters
Jan/2023	0	0	0	0	5-brown leafy
					substance,
					cigs, lighters
Feb/2023	0	0	0	1	1-lighter
Mar/2023	0	0	0	0	1-\$10 bill, 2\$ 1
					bills

GENERAL APPERANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:

Living Area: The living areas were found to be clean with no concerns regarding sanitation or security.

- Dorms During the walk through inspection of the dorms they were found to be clean and clutter free.
 Offender's property was neatly stored in their assign lockers. Sick call forms and grievances were available in the dorms. DPS&C offender rules as well as the facility rules along with menus were posted on the offender's bulletin boards.
- Cell Block Clean with minimal property was noted. On the day of inspection there were 7 DOC male
 offender's in administrative segregation with no concerns or negative comments voiced.

Culinary/Dining: Culinary/Dining area were clean, last DHH Retail Food inspection was conducted on 10/19/2022 with 3 non-critical items listed (see attached DHH retail food report and corrective action) Utensil inventories were correct with a good check-out system in place.

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

Yard Areas: There is ample yard space for offender's to exercise. Yards were found to be clean and debris free.

Maintenance: Work orders are utilized for repairs. Tools and chemicals in the area were checked and were found to be accurate. A check-out system was in place.

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

- I-A-001 Safety/Sanitation/Inspections (MANDATORY): Compliant Documentation reflects that periodic inspections were being made. Last FM inspection was conducted on 1/19/2023 with no deficiencies noted. Last DHH incarceration was conducted on 10/19/2022 with 3 non-critical items listed (see attach DHH REPORTS with corrective actions taken). Last DHH Retail Food was conducted on 10/19/2022 with 3 non-critical items listed.
- **I-C-001 Emergency Plan (MANDATORY):** Compliant Facility has an approved emergency plan in place. Documentation reflects that all staff has been trained on emergency procedures.
- I-C-003 Fire Safety/Code Conformance (MANDATORY): Compliant Last FM Inspection was conducted on 1/19/2023 with no deficiencies noted.
- II-A-006 Staff Log (MANDATORY): Compliant Staff logs of pertinent information shift activity, daily events, security staff/ supervisor/medical 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. 14 formal counts in a 24hr period.
 - How many formal counts are conducted each shift? 7 on day shift, 7 on night shift.
 - How many counts are conducted each day? 14
 - Stick outs counts Compliant
 - ➤ How does the facility accomplish this? Staff conducts a visual count according to the policy. Documentation was 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 If yes,

- What is their classification process to determine who is eligible for trustee status?
 Facility utilizes the same criteria as DPS&C.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

II-A-016 Photo Identification (MANDATORY): Compliant - All offender's 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
June/2022	75	170	44%	0
July/2022	76	181	42%	0
Aug/2022	75	186	40%	0
Sept/2022	75	198	38%	2
Oct/2022	75	202	37%	1
Nov/2022	75	222	34%	0
Dec/2022	75	214	35%	0
Jan/2023	64	211	30%	0
Feb/2023	61	191	32%	1
Mar/2023	64	193	33%	1

- **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 does not house female offenders.
- **II-C-001 Procedures for Searches:** Compliant Policy and procedures are in place. Documentation of shakedowns of dorms, 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 in place.

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 will request through classification, classification will review request to make
 sure all information is accurate and then forward it to the Warden for 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/wash basins with temperatures controlled hot/cold water at all times.
- IV-B-002 Plumbing Fixtures Showers (MANDATORY): Compliant All offenders are able to shower daily. Water temperature 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 Smith (MD) and Dr. John Little (Dental).
- IV-C-005 24 Hour Care (MANDATORY): Compliant When offenders medical needs are not meet at the facility Morehouse General Hospital will be utilized along with Ochsner LSU Monroe La.
- IV-C-006-1 Pregnancy Management (MANDATORY): Compliant Facility does not house female 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, Tuesday and Friday of each week. 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): Compliant Policy 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. Michael Smith. Documentation is on file to support staff training on prevention and intervention.
- IV-C-015 Offender Deaths (MANDATORY): Compliant No offender deaths 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 occurrence 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? NO
- Is this facility PREA compliant? Yes
 - If yes, date compliance received:
 - If this facility is required to be PREA compliant due to contract language, and has not done so, what is their plan of action for compliance? N/A
- V-A-004 Religious Programs: Compliant Volunteers are utilized for religious programs.
- 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)
 Louisiana Risk Management Model Phases 1&2
 Understanding and Reducing Angry Feelings
 Inside Out Dads
 Thinking for a Change
 FDIC Money Smart
 HiSet
 IC3 (Introduction to Computers- 3 Levels)
- List all other Offender Programs Religious AA/NA

V-B-002 Educational Programming: A written Policy and procedures is in place.

GED Program

Number of GED Slots	20
Number of Participants	16
YTD Number of Completions	

V-B-003 Substance Abuse Programs: AA/NA

- V-C-001 Releasing Offenders: Compliant Personal property of offenders are returned along with obtaining a signed receipt. Medical ensures that offender receives 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 Warden, 2nd level Chief Brown
 - What is the specified time period for response at each level? 1st level 40 days, 2nd level 20 days
- **VII-A-002 Weapons Training:** Compliant 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: Compliant No plans for expansions.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff morale at Morehouse 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 was 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:

On the day of inspection the offender's 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 Wilhite 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 Morehouse Detention Center remains on an annual monitoring.



John Bel Edwards GOVERNOR

Office of State Fire Marshal

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

Inspection Report Report # CB-22-017080-1

No Deficient/Cautionary Codes cited.



Daniel H. Wallis FIRE MARSHAL

THE RESERVE THE PARTY OF THE PA	Complianc	ce Building Inspection		inspection E	Date	1/19/2023 3:50:41 PM
Structure ID	51690	No. of Bu	No. of Buildings		0	J329
Capacity	272	Year Built	Year Built		n Type	
Building/Trade Name MOREHOUSE PARISH DETENTION CENTER			Address 6444 PATEY ROAD, COLLINSTON, LA 71229			
ensinghtens.		9-47. 54 与初 期	Owner Inform	nation		(19:50:30:30:00:00:00:00:00:00:00:00:00:00:00
Owner Type Municipal Project		Name C		Contact Phone (318) 281-4141	ontact Phone Contact Email	
Address Courthouse, B.	ASTROP, LA	71220				
Wilder of Long &	Çiriya (SA) biyar	on of the sate of the sate.	Tenant Inform	nation		and more than the same and
Nаme			Suite Numb	per Floor Num	ber	Square Footage
			Cocupancy D	etails .	可以代表的	
Occupancy Type Institutional		Details		Details GROUP I-3 (DETEN LITY TYPE: CONDITI		
Occupancy Type Institutional		Details INSTITUTIONAL BU DETENTION/CORR	JILDING TYPE: RECTION FACIL	: GROUP 1-3 (DETEN LITY TYPE: CONDITI	ITION/COF	RRECTION);
Occupancy Type Institutional	graph star	Details	JILDING TYPE: RECTION FACIL	: GROUP I-3 (DETEN LITY TYPE: CONDITI	ITION/COF	RRECTION);
Occupancy Type Institutional NO APPARENT DE	Application of the second of t	Details INSTITUTIONAL BU DETENTION/CORR	Commen	GROUP I-3 (DETEN LITY TYPE: CONDITI ts	ITION/COF	RRECTION);
Occupancy Type Institutional NO APPARENT DE	EFICIENCIES	Details INSTITUTIONAL BU DETENTION/CORR	JILDING TYPE: RECTION FACIL COMMENT CTION, ACCEPT	GROUP I-3 (DETEN LITY TYPE: CONDITI ts	ITION/COF	RRECTION);
Occupancy Type Institutional NO APPARENT DE	EFICIENCIES	Details INSTITUTIONAL BU DETENTION/CORR S AT TIME OF INSPEC	JILDING TYPE: RECTION FACIL COMMEN CTION, ACCEP ISPECTOR Infor	ts TABLE FOR OCCUP	ANCY.	RRECTION);

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

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 viciation 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 34-02-224	Permit Name Morehouse Parish Detentio	Permit Name Morehouse Parish Detention Center-224				
Name of Establishment Morehouse Parish Detention (Center-224	Owner Name				
Address 6444 Patey RD Bastrop, LA 7	11229	Date 10/19/2022	Time 02:20 PM			

Category	Code Reference	Description of Violations
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair. TRUSTEE: 2X HANDSINKS ALPHA: 1 HANDSINK
Approved Bathing Facilities	101	24 - There is chipped tile in the shower area: BRAVO DORM [Repeat]
Approved Plumbing	101	41 - Drinking fountain is in disrepair. ALPHA DORM
Comments: REPORT EMAILED TO	WADDEN	
twilhite@mpso.net	WARDEN.	*

. Number Licensed F 272	òr	Number in Attendance 204	License An 11/30/	
Sanitarian Name/Print Jonathan Eagles	Phone # 318-283-0806	Sanitarian Signature	R.S.# 2083	,
The above mentioned violations we	re called to my attention and wer	e explained to me in detail. I hereby agree to		
Correct Critical Violations by	*	Correct Non-Critical Violation	s by	
Name/Title WARDEN TREVOR WILHITE		Signature of Recipient Arever W	Mite	

STAT	TE OF LOUISIANA TMENT OF HEALTH OF PUBLIC HEALTH	
INST	ITUTION REPORT	* **
Agency License No. N/A	Anniversary Month NOVEMBER	
Name of Establishment MOREHOUSE PARISH DETENTION CENTER-224	Mailing Address	
Address 6444 PATEY RD		
City, state, Zip Code BASTROP LA 71229		
Type of Facility JAILS 272 204		
Parish Morehouse	Date Inspected 10/19/2022	
The above establishment has been inspected by a representative X License is Recommended; License is Not Recommended; License is Pending Reinspection;	e of this section, and:	
from the standpoint of sanitation.	JONATHAN EAGLES	2 0 8 3
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 34-0001202-1	Permit Name MOREHOUSE PARISH	Permit Name MOREHOUSE PARISH DETENTION CENTER RESTAURANT		
Name of Establishment MOREHOUSE PARISH DETENTION CENTER		Owner Name MOREHOUSE PARISH LAW ENFORCEMENT		
Address 6444 PATEY RD COLLINSTON, LA 71229		Date 10/19/2022	Time 01:55 PM	

LAC TITLE 51 PART XXIII

Category	Code Reference	Description of Violations
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3101 .	102 - 3101 - Plumbing is not maintained. UTILITY SINK FAUCET LEAKS.
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.3 - Walls/ceilings or attached equipment are not clean. 3X CEILING TILES IN FOOD PREP AREA. [Repeat]
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. 5 LIGHTING FIXTURES OUT OF ORDER.

Comments:

REPORT EMAILED TO WARDEN.

twilhite@mpso.net

NOTICE RS 40:31.38 (ACT 66)

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

Sanitarian Name/Print Jonathan Engles	Phone # 318-283-0806	Sanitarian Signature	R.S. # 2083	
The above mentioned violations	were called to my attention and were ex	plained to me in detail. I hereby agree to		
Correct Critical Violations by		Correct Non-Critical Violations	by	
Name/Title WARDEN TREVOR WILHITE		Signature of Recipient Steven Wilh	te	,

WORK	ORDER REQUEST
ORDER # DA	TE <u>2.22.23</u> TIME
LOCATION OF WORK TO BE DONE	Alpha & Braw Trustee
2 Phoha I harols 3 Chipped tile in Sho	epijy: Trustee - 2x Manasinks
7 SIGNATURE OF REQUESTING OFFICE	ER: SAL LATONHOW LENS
•	vor Wilhite
>>>>>>>>>	USE ONLY<<<<<<<
WORK PERFORMED BY: U	
DATE AND TIME PERFORMED:	2-22-33
RETURNED TO WARDEN / DATE	3/15/23 TIME
COMMENTS:	· · ·
Reface 1-500 othe have be Remove tile consumptions for	k no party for the

.1

W	ORK ORDER REQUEST
ORDER #	DATE <u> </u>
LOCATION OF WORK TO BE DON	ve Kitchen
DESCRIPTION OF PROBLEM OR	WORK REQUESTED:
2 Walls Corling by att 3 (3x certing tiles) 4 Lighting intensity is 5 with unpockaged pote 6 sticers, annalis etc.	intained; Ithlity sink faucit leaks tached equipment are not clean. In fixed prepareal. In areas where employees are working intally hazardous fixed or Knives. Is not at least 50 foot rardles Its not at least 50 foot rardles Its out of order. FFICER: July Latershow Lines
WARDEN'S SIGNATURE:	Thosan Wilhite
>>>>>>>>>	ICE USE ONLY<<<<<<<<
WORK PERFORMED BY:	Wang for
DATE AND TIME PERFORMED:	2-22-23
RETURNED TO WARDEN / DATE	3)15/23 TIME
COMMENTS: Repares Replace ceriling Replace Bulbs	ed Pipes under synk= Lile to prep Aren High where out

Facility: Morehouse Detention Center
Date: 4/13/23
Name of Program: IC3 (Introduction to Computers - 3 Levels)
Date of Program Implementation: 2018
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. Number of offenders accepted. Number and type of services provided. Offender's completion/termination from program. Yes No Yes No
ls 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 Cerrections.
Monitoring Team Member or B.IG Team Member/Leader Date
wa mana ana ang magala kaga ang magala kaga ang magala kaga kaga kaga kaga kaga kaga kaga

Facility: orehouse Detention Center	
Date: 4/13/23	
Name of Program: HiSet	
Date of Program Implementation: 2012	
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 assesses system? ⊠ Yes □ No	sment and classification
Has program curriculum changed during preceding 12 months?	⊠ No ✓
ls there an objective method used to assess completion? ☑ Yes ☐ N	o
Detailed records are maintained on the following:	
All offenders who apply. Number of offenders accepted. Number and type of services provided. ○ Yes Offender's completion/termination from program. ○ Yes	☐ No ☐ No ☐ No ☐ 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 maint Department of Public Safety and Corrections.	ain its certification by the
Monitoring Team Member or B.IG Team Member/Leader	4/13/23 Date
MODUCKUD LESM MEDICELOEKU KUM LESM MEMPAKI OSCAT	113764

Facility: Morehouse Detention Center	
Date: 4/13/23	
Name of Program: Louisiana Risk Management Model Phases 1&2	
Date of Program Implementation: 2015	
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 c system? ⊠ Yes □ No	lassification
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. Number of offenders accepted. Number and type of services provided. Offender's completion/termination from program. Yes No Yes No	
Is there a formal graduation ceremony for those who complete the program?	☐ No
The CTRP referenced above continues to meet necessary criteria to maintain its certification Department of Public Safety and Corrections.	ation by the
DE PRODEROM CHONSULTONIT 4/13/23	
Monitoring Team Member or BJG Team Member/Leader Date	

Facility: Morehouse Detention Center
Date: 4/13/23
Name of Program: Understanding and Reducing Angry Feelings
Date of Program Implementation: 2015
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
ls there an objective method used to assess completion? 🛛 Yes 🔲 No
Detailed records are maintained on the following:
All offenders who apply. Number of offenders accepted. Number and type of services provided. Offender's completion/termination from program. Yes No Yes No
ls 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.
De Proceen conduction T 4/13/23
Monitoring Team Member or RIG Team Member/Leader Date

Facility: Morehouse Detention Center
Date: 4/13/23
Name of Program: Inside Out Dads
Date of Program Implementation: 2015
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? ☐ 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. Number of offenders accepted. Number and type of services provided. Offender's completion/termination from program. Yes No Yes No 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.
Be Proceson consument 4/13/23
Monitoring Team Member or BJG Team Member/Leader Date

Facility: Morehouse Detention Center
Date: 4/13/23
Name of Program: Thinking For A Change
Date of Program Implementation: 2015
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. Number of offenders accepted. Number and type of services provided. Offender's completion/termination from program. Yes No 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.
Ble Propagn CensuronT 4/13/23
Monitoring Team Member or R IC Team Member/Leader Date

Facility: Morehouse Detention Center
Date: 4/13/23
Name of Program: FDIC Money Smart
Date of Program Implementation: 2015
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. Number of offenders accepted. Number and type of services provided. Offender's completion/termination from program. Yes No Yes No 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.
De proceson consultant 4/13/23
Monitoring Team Member or BJG Team Member/Leader Date