# Department of Public Safety & Corrections

State of Louisiana

JOHN BEL EDWARDS Governor



JAMES M. LE BLANC Secretary

December 11, 2023

# MEMORANDUM

TO: The Honorable Sammie Byrd Sherift of Madison 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 Bayou Correctional Center on November 14, 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/mk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Jannoris Bonney, Warden, Bayou Correctional Center Seth Smith, Chief of Operations Michele Dauzat, Warden, DWCC Tyrone Mays, BJG Team Leader



# BJG MONITORING REPORT

Annual

Rev. 08/01/2022 mwk

Facility Name: BJG Team Leader & Monitors:	Bayou Correctional Center Asst. Warden Tyrone Mays, BJG Team Leader (NE Region); Col. Roderick Malcolm, BJG Team Leader (NW Region)
· · · · · · · · · · · · · · · · · · ·	Warden Jannoris Bonney / jbonney@bayoucorrect.com
Facility Staff:	
BJG Inspection Date:	14 November 2023
Previous BJG Inspection Date:	07 July 2022
Operational Capacity:	289
Count on Day of Visit:	277

# Concerns or Issues from the previous BJG Monitoring Inspection:

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	237	0	237
Number of Local Offenders	4	0	4
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	277	0	277

### Number of DOC Offenders that are:

Single Bunked	0
Double Bunked	171
Triple Bunked	62
Total	233

# Number of DOC Offenders that are in Restricted Housing:

Single Bunked	0
Double Bunked	4
Triple Bunked	0
Total	4

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
October 2022	1	0	0	0
November 2022	1	0	0	0
December 2022	3	0	0	0
January 2023	1	0	0	0
February 2023	0	0	0	0
March 2023	2	0	0	0
April 2023	4	0	0	0
May 2023	1	0	0	0
June 2023	4	0	0	0
July 2023	4	0	0	0
August 2023	4	0	0	0
September 2023	4	0	0	0

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

Month/Year	Illicit	Alcohol	Weapon	Cell Phone	Other
	Substance				
Oct 2022	0	0	0	0	1
Nov 2022	0	0	0	1	0
Dec 2022	0	0	0	0	0
Jan 2023	0	0	0	1	0
Feb 2023	0	0	0	0	0
Mar 2023	0	0	0	0	0
Apr 2023	0	0	0	0	0
May 2023	0	0	0	0	0
June 2023	0	0	0	0	0
July 2023	0	0	0	1	0
Aug 2023	0	0	0	0	1
Sept 2023	0	0	0	1	0

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

Living Area:

- Dorms The dorms were in good condition and clean. Personal property was stored neatly.
- **Cell Block** The cells were clean and odor free. All of the inmates' personal property was neatly stored and the cells were clutter free.

**Culinary/Dining**: Culinary tools were appropriately inventoried with check-out systems in place. The culinary area were clean doing the walk-through.

**Bathrooms**: The bathrooms were found to be clean, odor free and in working order. Lavatory/showers have temperature controlled hot/cold water and the temperatures are checked.

Yard Areas: There ample space for inmates to exercise. The yard area were well kept and free of debris.

**Maintenance**: Tools and chemicals in their area were reviewed and found to have an accurate account of tools with a check-out system in place. Work orders are utilized for immediate repairs.

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

- I-A-001 Safety/Sanitation/Inspections (MANDATORY): Compliant Kitchen inspection are on are on file as well as water temperature logs. Monthly inspection are conducted at the facility. The last DHH inspection was 11/14/2022. The last FM inspection was 5/17/2023.
- I-C-001 Emergency Plan (MANDATORY): Compliant The 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 on 5/17/2023 with no deficiencies noted.
- **II-A-006** Staff Log (MANDATORY): Compliant Documentation in logs by staff shows pertinent information daily events, security rounds and all other important activity throughout shifts tour of duty.

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

- How many formal counts are conducted each shift? Day shift (3), Night (3)
- How many counts are conducted each day? 6

# Stick outs counts

- How does the facility accomplish this? Staff conduct visual head count in the area the inmate is assigned.
- Does this process ensure accountability and safe/secure operation of the facility? Yes
- **II-A-008** Offender Population Management System: Compliant If an inmate is transferred to another facility, all records are transferred with the inmate.
- **II-A-010** Admissions: Compliant –Inmate personal property is inventoried and stored along with a signed inmate receipt. Current policy and procedure are in place.

## II-A-012 Classification System: Compliant

Does this facility have any trustees that work outside the secure perimeter? (Yes or No) Yes

If yes,

- What is their classification process to determine who is eligible for trustee status? Inmate being screened for trustee status must meet the same criteria as utilized by DPS&C.
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes
- **II-A-016 Photo Identification (MANDATORY):** Compliant Inmate receives a photo ID upon intake process at 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
October 2022	61	289	22%	0
November 2022	60	289	21%	3
December 2022	43	289	15%	0
January 2023	41	289	15%	0
February 2023	37	289	12%	0
March 2023	27	289	9%	0
April 2023	32	289	11%	0
May 2023	32	289	11%	0
June 2023	26	289	8%	0
July 2023	22	279	7%	0
August 2023	32	289	11%	0
September 2023	49	289	17%	0

- **II-A-019 Offender Transfers:** Compliant Policy and procedure in place and logs are maintained reflect inmate transfers.
- **II-A-020 Cell Checks (MANDATORY):** Compliant Documentation on file reflects that cell checks are within the guidelines. Policy and procedures are in file.
- II-B-002-1 Use of Restraints for Pregnant Offenders: N/A
- **II-C-001 Procedures for Searches:** Compliant Policy and procedure in place. Documentation on file for review to reflect shakedowns throughout different area of the facility.
- **II-D-001** Key, Tool, and Utensil Control (MANDATORY): Compliant A review of keys, tools, and utensils were found to have an accurate accountability in place with inventories and check-out systems.
- III-A-001 Rules and Discipline (MANDATORY): Compliant
  - Does the facility's offender orientation include the application process for applying for restoration of good time? Yes
  - What is their restoration of good time application process for the offender population? Inmate will submit a request for restoration of good time to Classification. Classification will review inmate request to make sure all information is accurate and then forward to the Warden for his review and approval. If all information is correct and accurate the Warden will forward 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 Facility has cycle menus reviewed annually and approved by Registered Dietician Heather White Lic # 2248 Exp. 6/30/24.
- **IV-A-006** Food Services Management (MANDATORY): Compliant Policy and procedure in place. Ample time is permitted for meal consumption and timeframe between meals compliant with guidelines. Inmates receive three hot meals per day.

- IV-B-001 Plumbing Fixtures Toilets & Washbasins (MANDATORY): Compliant All inmates have access to toilets and washbasins with temperature controlled hot/cold water at all time.
- **IV-B-002 Plumbing Fixtures Showers (MANDATORY):** Compliant All inmates are able to shower every day. Water temperature logs indicate full compliance with water temperature requirements.
- **IV-B-005 Personal Hygiene (MANDATORY):** Compliant Documentation reflects indigent inmates personal hygiene items as needed.
- 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 inmates are seen regardless of their ability to pay facility co-pay. Inmates are advised on how to obtain medical services.
- **IV-C-003 Provision of Treatment (MANDATORY):** Compliant On site health care available Kyle Erwin, Doctor, (Lic #20130424 Exp. 1/31/24), serves their Health care authority.
- **IV-C-005 24 Hour Care (MANDATORY):** Compliant Medical personnel on call 24 hours a day. Madison Parish Hospital and Ochsner Health Monroe are currently utilized in emergencies.
- IV-C-006-1 Pregnancy Management (MANDATORY): N/A
- **IV-C-008** Annual TB Testing: Compliant TB testing is conducted on all inmates at no cost to the inmates.
- **IV-C-009** Chronic Care Program (MANDATORY): Compliant Health records show that inmates with chronic issues receive continued care. Policy in place for chronic care. All other inmates 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 inmates Monday through Friday. Inmates have access to 24 hour emergency care by the on call nurse.
- **IV-C-013** Infirmary Care: Compliant Facility has an on call Nurse Schedule on file and a completed request for transfer to DPS&C.
- IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): Compliant – Policies and procedures are in place related to medical releases according to DPS&C guidelines.
- **IV-C-014** Suicide Prevention and Intervention (MANDATORY): Compliant Policy and procedure in place and approved by the facility physician. Documentation is on file to support Staff training on prevention and intervention.
- IV-C-015 Offender Deaths (MANDATORY): Compliant There has been one death at the facility. Inmate John Dotson #179182, 54 year old Black male DOB 4/6/1969, Cause of death (Hypertensive cardiovascular disease) Natural cause.
- **IV-C-016** Notification: Compliant Policy and procedures are in place related to notification of family and visitation with an inmate admitted to ICU or trauma center according to DPS&C guidelines.

- **IV-D-001 Healthcare Quarterly Meetings (MANDATORY):** Compliant Quarterly meetings are conducted and documentation on file.
- **IV-D-004 Confidentiality of Health Information/Individual Health Record:** Compliant Completed documentation of completed consent forms are in place in file.
- IV-D-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY): Compliant – Procedures and policy are in place. Documentation of staff training for the administration of Narcan is on file.
- **IV-D-007** Internal Review/Quality Assurance (MANDATORY): Compliant Facility has a policy in place that has been approved by HCA, signed copy in file.
- IV-E-001 Alleged and Substantiated Sexual Assaults:
  - Is this facility required to be PREA compliant due to contract language? (Yes or No) N/A
  - Is this facility PREA compliant? (Yes or No) 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 Inmates are provided opportunities for religious programming.
- V-A-005 Exercise & Recreation Access (MANDATORY): Compliant Inmates are allowed recreation daily with weather permitting.

### V-B-001 Programs and Services:

- List all Certified Treatment Programs (Attach Form IS-B-8-b) Warden Bonney stated that the facility is committed to getting Certified Treatment Programs started for the inmate populations but unfortunately has not been able to get any instructors for the programs at this time.
- List all other Offender Programs Religious Services
- V-B-002 Educational Programming: (Facility does not offer Educational programming at this time, facility does not have an instructor to teach these programs.

### **GED Program**

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

V-B-003 Substance Abuse Programs: Compliant – Facility has policy and procedure in place.

- V-C-001 Releasing Offenders: Complaint Facility returns inmate's personal property with obtaining a signed receipt. Medical department ensures inmates receive medication that required upon release. Inmates releasing from the facility receive information on community service.
- V-C-002 **Regional Reentry Programs** (Are offenders releasing with two valid forms of identification?): Yes Inmates are released with two forms of identification.
- V-C-004 Parole Board Procedures: Compliant Documentation on file reflects Warden or designee are present during parole board hearing.
- 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 Captain, 2nd Level Warden
  - What is the specified time period for response at each level? 1<sup>st</sup> Level 40 days, 2<sup>nd</sup> Level 20 days
- VII-A-002 Weapons Training: Compliant Documentation of completed training on file.
- VII-B-010 Monthly Reporting: Compliant Monthly reports are submitted on time each month.
- VII-B-012 Proposed Expansions: Compliant No plans for expansions at this time.

### STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff morale was observed to be very good. Staff is very knowledgeable in their job duties. Throughout the inspection, all staff members were very professional and eager to assist with audit as needed. Staff members was dressed appropriately and each staff member had an identification on their person.

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

Inmates' morale and quality of life was deemed good. The inmates interviewed during the walk-through voiced no negative comments. Each inmate stated they were aware of the sick call process and how to file a grievance.

### **RECOMMENDATION:**

Warden Bonney and his staff at Bayou Correctional Center continually strive to remain compliant with the Basic Jail Guidelines. The facility operates smooth and efficient manner. Warden Bonney and staff are committed to maintaining safe, secure, sand stable environment for the inmates in their custody. At this time, it is recommended that they remain on annual monitoring.

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# **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-23-002680-1



Daniel H. Wallis FIRE MARSHAL

John Bel Edwards GOVERNOR

Inspection Type

Structure ID

 FIRE MARSH.

 Location Information

 Compliance Building Inspection
 Inspection Date
 5/17/2023 4:21:05 PM

 No. of Buildings
 8
 Facility Code

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Capacity		Year Built	Construction Type Type VB / (000)		Type VB / (000)	
Building/Trade Name			Address			
BAYOU CORRECTIONS	MADISON PARIS	SH	196 OLD HV	VY 65 SOUTH,	TALLUL	AH, LA 71282
		Owner	Information	n		
Owner Type	Name		Co	ntact Phone	Conta	act Email
Private Project	JANOR	RIS BONNEY	(31	8) 480-1223	JBON M	INEY@BAYOUCORRECT.C
Address						
		Tenant	Informatio	n		
Name			Number	Floor Num	ber	Square Footage

	Occupancy Details	
Occupancy Type	Details	
nstitutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 5	
	Deficient and Cautionary Items	Status

Per the most recent legislative update to the Louislana Administrative code, LAC 55V:1701 CAUTIONARY effective 8/1/2021, all detention and correctional occupancies in the State of Louisiana shall be inspected by the Office of State Fire Marshal at least annually. The inspection date on this report shall serve as the annual inspection for this facility.

#### Comments

THIS FACILITY WAS INSPECTED ON JANUARY 23RD 2023. THAT INSPECTION REPORT SHALL SERVE AS THE ANNUAL INSPECTION.

	Inspector	Information	
Name: Jeromy Defee	Badge Number: 707	Inspector Signature:	
	Person to whom requ	irements were explained	
Name:	Title:	Signature:	

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

Follow-up

Permit Number 33-0000072	Permit Name Bayou Correctional Center			
Name of Establishment Bayou Correctional Center		Owner Name BAYOU VIEW LLC		
Address 196 OLD US HIGHWAY 65 S 1	TALLULAH, LA 71282	Date 11/14/2022	Time 02:30 PM	

# LAC TITLE 51 PART XVIII

by this office.		
Category	Code Reference	Description of Violations
Building Requirement	101	3 - The walls are in disrepair. DORM D-SHOWER WALLS [Repeat]
Building Requirement	101	4 - The walls are not smooth and easily cleanable. DORM E- SHOWER FLOORS

#### **Comments:**

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY JANORRIS BONNEY/ WARDEN COPY OF REPORT EMAILED TO JBONNEY@BAYOUCORRECT.COM

Number Licensed For 269		Number in Attendance 289	License Anniversary 11/30/2022	
Sanitarian Name/Print Jason Pylant	Phone # 318-728-4441	Sanitarian Signature	R.S.# 1671	
The above mentioned violations	were called to my attention and we	re explained to me in detail. I hereby agree to		
Correct Critical Violations by		Correct Non-Critical Violations by		
Correct Critical Violations by Name/Title JANORRIS BONNEY/ WARDEN		Signature of Recipient		



### STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

### Retail Food Notice of Violations

Routine/Renewal

Permit Number	Permit Name			
33-0000056	BAYOU CORRECTIONAL F.	ACILITY (PRISON KITCHEN)		
Name of Establishment BAYOU CORRECTIONAL FACILIT	Y	Owner Name BAYOU VIEW LAND CO	MPANY LLC	
Address 196 OLD US HIGHWAY 65 S TALLI	ULAH, LA 71282	Date 08/28/2023	Time 12:05 PM	

# LAC TITLE 51 PART XXIII

Category	Code Reference	Description of Violations		
FOOD CONTACT EQUIPMENT/UTENSILS, CONSTRUCTION AND SANITIZATION	2513	<ul> <li>30 - 2513 - Quaternary ammonium solution concentration for warewashing is not 200 p.p.m. at 75°F. [COS</li> <li>34 - 3903 - Chemicals are stored with/above food, equipment, utensils, linens, single-service or single use articles. [COS]</li> </ul>		
TOXIC CHEMICALS	3903			
NON-CRITICAL ITEMS: The by this office.	nese items should	d be corrected	by the next reg	ular inspection or according to the compliance schedule (see below) established
Сатедогу		Code Reference	Description of Violations	
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING		3703	106 - 3703.3 - Walls/ceilings or attached equipment are not clean.	

#### **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 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	Phone #	Sanitarian Signature	R.S. #	
Jason Pylant	318-728-4441		1671	
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		
		Signature of Recipient		
Name/Title				
JANORRIS BONNEY/ WARDE	N	tor all		



# **BAYOU CORRECTIONAL CENTER**

# Department of Health (CORRECTIVE ACTION)

On the date of 11/14/22, Bayou Correctional Center had two (2) **non-critical items** during its conducted health inspection. The **first** non-critical violation was **Code Reference 101- Building Requirement** with the description of the violation describing "The walls are in disrepair DORM D-SHOWER WALLS". The corrective action for this was to remove all old wall panels and replace them with new panel, with this action being done immediately after gathering all material to complete the task. The **second** non-critical violation describing "The walls are not smooth and easily cleanable. DORM E-SHOWER FLOORS". The corrective action for this was to remove all old wall panels and replace them with new panel and place a fresh new coating on the shower floor, with this action being done immediately after gathering all material to complete the task.

Janorris Bonney\_ Warden

> Humphrey - LSA Emails 0003111.12