

Department of Public Safety & Corrections  
State of Louisiana

JOHN BEL EDWARDS  
GOVERNOR

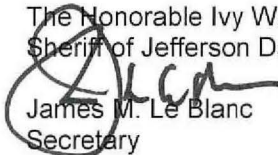


  
JAMES M. LE BLANC  
SECRETARY

December 18, 2023

**MEMORANDUM**

**TO:** The Honorable Ivy Woods  
Sheriff of Jefferson Davis Parish

**FROM:**   
James M. Le Blanc  
Secretary

**RE:** "Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring reports regarding the Basic Jail Guidelines (BJG) inspections that were conducted at Jefferson Davis Parish Jail on May 17, 2023, with a follow-up inspection on November 29, 2023.

During the May 17, 2023 inspection, the following concerns were noted:

- Living Area - Needs to be cleaned and decluttered. Too many items are left out.
- Dorms – Beds not made up properly. Shakedown are to be conducted daily (3- day shift, 3- night shift). This is not being done.
- II-A-020 - Frequency of Cell Checks: An established procedure exists, however, per Warden, neither he nor his staff are conducting cell checks, as the established procedure outlines.
- II-D-001- Key, Tool, and Utensil Control: Utensil and tool control could be improved. Utensils/tools need to be labeled in a way that cannot be altered. An accurate record of check-out/check-in needs to be established to regain accountability and control.

The follow-up inspection on November 29, 2023, shows improvements and the facility's commitment to providing a secure, safe, and stable environment for DOC inmates in their custody. BJG Team Leader Selten Manuel did make a recommendation regarding chemical inventory being organized and recorded properly. At this time DPS&C will continue with annual monitoring visits with a waiver.

Thank you for your support of the BJG process.

JML/mk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association  
Dustin Locke, Commander, Jefferson Davis Parish Jail  
Seth Smith, Chief of Operations  
E. Dustin Bickham, Warden DCI  
Selten Manuel, BJG Team Leader



# BASIC JAIL GUIDELINES MONITORING REPORT

Semi-Annual

Ver. 11/28/2023 mwk

**Facility Name:** Jefferson Davis Parish Jail  
**BJG Team Leader & Monitors:** Major Selten Manuel, Captain Craig Pearce  
**Facility Warden & Email Address:** Commander Dustin Locke (dlocke@jdpso.org)  
**Facility Staff:**  
**BJG Inspection Date:** November 29, 2023  
**Previous BJG Inspection Date:** May 17, 2023  
**Operational Capacity:** 180  
**Count on the Day of Visit:**

**List Concerns or Issues from the previous BJG Monitoring Inspection:** Cellblock and dorms need attention. Shakedown not done according to schedule. Kitchen utensils not signed in/out or logged properly. Tool and chemical accountability need implementation.

## Count on the Day of Visit:

	# MALE	# FEMALE	TOTAL
Number of DOC Inmates	6	0	6
Number of Local Inmates	135	0	135
Number of Out of State Inmates	0	0	0
Number of Federal Inmates	0	0	0
Number of ICE Detainees	0	0	0
<b>TOTAL</b>	<b>141</b>	<b>0</b>	<b>141</b>

## Number of DOC Inmates that are:

Single Bunked 0  
Double Bunked 6  
Triple Bunked 0  
**Total** 6

**Number of DOC Inmates that are in Restricted Housing:**

Single Bunked	0
Double Bunked	0
Triple Bunked	0
<b>Total</b>	<b>0</b>

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

Month/Year	Inmate/Inmate	Inmate/Inmate w/ Significate Injury	Inmate/Staff	Inmate/Staff w/ Significate Injury
January 2023	0	0	0	0
February 2023	0	0	0	0
March 2023	0	0	0	0
April 2023	0	0	0	0
May 2023	0	0	0	0
June 2023	0	0	0	0
July 2023	0	0	0	0
August 2023	0	0	0	0
September 2023	0	0	0	0
October 2023	0	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
January 2023	0	0	0	0	0
February 2023	0	0	0	0	0
March 2023	0	0	0	0	0
April 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	0	0
August 2023	0	0	0	0	0
September 2023	0	0	0	0	0
October 2023	0	0	0	0	0

**GENERAL APPEARANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY****Living Area**

- **Dorms** – Dorms conditions and cleanliness improved. Clear bags used for offender property.
- **Cell Block** – Orderly and clean at time of inspection

**Culinary/Dining:** - All tools are marked and checked out properly

**Bathrooms:** Showed good improvement on cleanliness

**Yard Areas:** Day room used for recreation. Police Jury has not made requested improvements (place top on outdoor recreation area and repair 18" gap between wall and fence) to outdoor recreation area.

**Maintenance:** Jeff Davis Parish is responsible for all maintenance issues.

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

- I-A-001 Safety/Sanitation/Inspections (MANDATORY): Compliant** - An inspection schedule established and conducted/logged by staff/officers. Fire Marshal inspection report is current, dated 4/12/2023. DHH inspection report is current, dated 7/18/2023. Water temperatures monitored and maintained by maintenance. Maintenance supervisor conducts monthly inspections.
- I-C-001 Emergency Plan (MANDATORY): Compliant** - All staff members trained on the emergency plan approved by DPS&C and is reviewed and revised on an annual basis.
- I-C-003 Fire Safety/Code Conformance (MANDATORY): Compliant** - Fire Marshal inspection report is current, dated 4/12/2023. No deficiencies noted at time of inspection.
- II-A-006 Staff Log (MANDATORY): Compliant** – Staff logs accurately maintained and current
- II-A-007 Counts (MANDATORY): Compliant**
- How many formal counts are conducted each shift? 3-day shift, 3-night shift
  - How many counts are conducted each day? 6
  - **Stickouts counts**
    - How does the facility accomplish this? Officer does a visual count of offenders
    - Does this process ensure accountability and safe/secure operation of the facility?  
Yes
- II-A-008 Inmate Population Management System: Compliant** – Proper required documentation maintained on all offenders
- II-A-010 Admissions: Compliant** – Offender searched upon admission and any property/possessions taken and inventoried. Medical/mental health screens performed, and photos and fingerprints recorded.
- II-A-012 Classification System: Compliant** -
- Does this facility have any trustees that work outside the secure perimeter? ([Yes](#) or No)
- If yes,
- What is their classification process to determine who is eligible for trustee status? Offenders screened by the warden for trustee status. Status determined by consideration of offense(s), time to serve remaining, prior escape attempts, and conduct during time served.
  - Does their classification process meet DPS&C, Corrections Services' criteria? Yes
- II-A-016 Photo Identification (MANDATORY): Compliant** – Offenders provided a photo ID upon intake into the facility

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
January 2023	3	3	100%	0
February 2023	3	3	100%	0
March 2023	3	3	100%	0
April 2023	3	3	100%	0
May 2023	3	3	100%	0
June 2023	3	3	100%	0
July 2023	5	5	100%	0
August 2023	5	6	83.3%	0
September 2023	5	6	83.3%	0
October 2023	5	7	71.4%	0

**II-A-019 Inmate Transfers: Compliant** – Offenders transported according to policies and procedures established.

**II-A-020 Cell Checks (MANDATORY): Compliant** – Warden/staff/officers conducting cell checks as established procedure outlines

**II-B-002-1 Use of Restraints for Pregnant Inmates: Compliant** – This facility does not house female DOC offenders. Facility houses female local offenders only. Restraints not used on female local offenders.

**II-C-001 Procedures for Searches: Compliant** – All searches are conducted daily and recorded then sent to Warden

**II-D-001 Key, Tool, and Utensil Control (MANDATORY): Compliant** – Utensil and tool control has improved. Tools labeled, and an accurate record of check in/check out established maintaining accountability and control.

**III-A-001 Rules and Discipline (MANDATORY): Compliant** – Offenders given a rulebook consisting of facility rules and regulations upon intake at orientation. Offenders sign acknowledgement of receipt of policy/procedure.

- Does the facility’s inmate orientation include the application process for applying for restoration of good time? No
- What is their restoration of good time application process for the inmate population? This facility is not responsible for these procedures and does not process these applications.
- Does their restoration of good time application process meet DPS&C, Corrections Services’ criteria? This facility is not responsible for these procedures and does not process these applications. Offenders transported to a facility offering courses for restoration of good time.

**IV-A-003 Food/Dietary Allowances (MANDATORY): Compliant** – Facility menus meet recommendations and required documentation maintained. Menus evaluated quarterly. Dietary allowances reviewed annually. Changes made as needed upon review.

**IV-A-006 Food Services Management (MANDATORY): Compliant** – Written policy/procedure established. Record maintained of meals served and times served.

- IV-B-001 Plumbing Fixtures – Toilets & Washbasins (MANDATORY): Compliant** – Accessible facilities are available to offenders and maintenance records maintained. Some restroom fixtures currently in process of repair or sanitation.
- IV-B-002 Plumbing Fixtures – Showers (MANDATORY): Compliant** – Accessible facilities are available to offenders and maintenance records maintained. Some shower surfaces and fixtures currently in process of repair or sanitation.
- IV-B-005 Personal Hygiene (MANDATORY): Compliant** – Policy/procedure established for procurement of hygiene products by offenders. Logs are maintained documenting items available and provided to offenders.
- IV-C-001 Access to Care/Clinical Services (MANDATORY)** (Does the facility charge a co-payment? If so, approved by DPS&C?): **Compliant** – Offenders receive information on accessing health care services and co-pay information upon orientation. Offenders brought to Jennings Hospital for major illness or injury.
- IV-C-003 Provision of Treatment (MANDATORY): Compliant** – Facility utilizes the Jennings Hospital for all treatment and care
- IV-C-005 24 Hour Care (MANDATORY): Compliant** – Policy/procedure established and a designated emergency care facility is available to offenders.
- IV-C-006-1 Pregnancy Management (MANDATORY): Complaint** – This facility does not house female DOC offenders.
- IV-C-008 Annual TB Testing: Compliant** – TB tests conducted upon intake and annually for offenders.
- IV-C-009 Chronic Care Program (MANDATORY): Compliant** – Facility complies with DPS&C policy and procedure for caring for offenders with chronic conditions. If an offender has a chronic condition, he transferred to a facility capable of providing care for offender's condition.
- IV-C-012 Access to Sick Call (MANDATORY): Compliant-** Facility complies with approved policy/procedure/practice of initiating and conducting sick calls. Sick calls are available to offenders provided by personnel licensed in their specific field.
- IV-C-013 Infirmary Care: Compliant** – On-site first aid provided for non-emergency and minor medical issues or conditions.
- IV-C-013-1 Medical Releases** (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): **Compliant** – No medical releases since last inspection.
- IV-C-014 Suicide Prevention and Intervention (MANDATORY): Compliant** – Health records maintained on offenders and documentation of staff training and observation of suicide watches logged. Written policy/procedure adhered to and staff trained annually.
- IV-C-015 Inmate Deaths (MANDATORY): Complaint** – Staff trained on policy/procedure of written notification of reporting requirements regarding offender deaths. Documentation submitted and maintained accordingly. No deaths reported since last visit.
- IV-C-016 Notification: Compliant** – Staff notifies medical of all requests from offenders.

- IV-D-001 Healthcare Quarterly Meetings (MANDATORY): Compliant** – This facility does not have a medical staff on site
- IV-D-004 Confidentiality of Health Information/Individual Health Record: Compliant** – An approved policy and procedure established, providers licensed, and records confidentially maintained.
- IV-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY): Compliant-** All offenders checked when rounds conducted
- IV-D-007 Internal Review/Quality Assurance (MANDATORY): Compliant** – Facility adheres to policy/procedure for evaluation of major risk management events. Evacuation routes posted throughout the facility.
- IV-E-001 Alleged and Substantiated Sexual Assaults: Compliant** – Facility is PREA compliant with PREA trained staff member. Warden Locke has never had a PREA case.
- V-A-004 Religious Programs: Compliant** – No religious programs are offered to offenders at this time.
- V-A-005 Exercise & Recreation Access (MANDATORY): Compliant** – Offenders have adequate access to recreation areas. The outdoor recreation areas need to have the requested improvements made to allow for adequate outdoor recreation access for offenders.
- V-B-001 Programs and Services:** No programs offered to offenders at this facility. Encouraged Warden to look into offering programs for offenders.
- List all Certified Treatment Programs (Attach Form IS-B-8-b)
  - List all other Inmate Programs
- 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:** No programs offered at this facility. Offenders transferred to a facility offering these programs if he wishes to participate in a treatment program.
- V-C-001 Releasing Inmates: Compliant** – Personal property returned to all released offenders. Offenders released with a 5-day supply of prescription medication (if on prescriptions), along with instructions on how to obtain medication upon release. Offenders released with two valid forms of identification.
- V-C-002 Regional Reentry Programs** (Are inmates released with two valid forms of identification?): **Compliant** – Offenders released with two valid forms of ID and a reference guide to community resources. Facility Participates in Standardized pre-Release Curriculum.
- V-C-004 Parole Board Procedures: Compliant** – Parole hearings conducted through Zoom only.

- VI-B-002 Grievance Process (MANDATORY): Compliant** – Video Request Kiosk
- Does the grievance process include at least two levels of review? Yes
  - Who is the designee at each level of review? Jail Supervisor, Assistant Warden, Warden
  - What is the specified time period for response at each level? 4 day response
- VII-A-002 Weapons Training: Complaint** – Training records reflect compliance of all personnel authorized to carry firearms and less-than-lethal weapons to reflect competency.
- VII-B-010 Monthly Reporting: Compliant** – Reports submitted in a timely manner. No issues to note from monthly reporting.
- VII-B-012 Proposed Expansions: Compliant** – No proposed expansions at the facility at this time.

**STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:** Staff was willing to help and answer any questions asked. Staff seemed to be happy on the job.

**INMATE COMMENTS/MORALE/QUALITY OF LIFE:** Inmates appeared to be satisfied with the quality of living conditions.

**RECOMMENDATION:** Recommended chemical inventory be rearranged and organized so all similar chemicals be stored together. Chemical bottles were all there but not all recorded properly. Discussed with the person in charge of chemical inventory.

**Based on the review and inspection of the facility, it is my recommendation Jefferson Davis Parish Jail continue with annual BJJ 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-23-013496-1.

**No Deficient/Cautious Codes cited.**

Location Information			
Inspection Type	Compliance Building Inspection	Inspection Date	4/12/2023 11:05:02 AM
Structure ID	No. of Buildings 1	Facility Code	
Capacity 180	Year Built 2017	Construction Type Type IIA / (111)	
Building/Trade Name		Address	
JEFFERSON DAVIS PARISH JAIL		US HWY. 90, JENNINGS, LA 70546	

Owner Information			
Owner Type	Name	Contact Phone	Contact Email
State Owned	WARDEN DUSTIN LOCKE	(337) 368-3400	DLOCKE@JDPSO.ORG
Address			
304 STATE STREET, JENNINGS, LA 70546			

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
THIS FACILITY WAS LAST INSPECTED ON 3/28/2022. NO DEFICIENCIES WERE APPARENT AT THE TIME OF INSPECTION. FREQUENCY IS NOW CHANGED TO ONE ANNUAL INSPECTION. IN COMPLIANCE. HEADCOUNT: 152. LAST FIRE DRILL: 3/7/23.

Inspector Information		
Name: Mikeal Dartez	Badge Number: 740	Inspector Signature:

Person to whom requirements were explained		
Name:	Title:	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.



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

**Detention or Incarceration  
Notice of Violations**

Routine/Renewal

Permit Number 27-000093	Permit Name Jefferson Davis Parish Regional Jail		
Name of Establishment Jefferson Davis Parish Regional Jail	Owner Name Jefferson Davis Parish Police Jury		
Address 1704 HIGHWAY 90 W JENNINGS, LA 70546	Date 11/30/2022	Time 11:40 AM	

**LAC TITLE 51 PART XVIII**

**NON-CRITICAL ITEMS:** These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.

Category	Code Reference	Description of Violations
Building Requirement	101	4 - The walls are not smooth and easily cleanable. Metal walls are rusting and pitting
Building Requirement	101	7 - There is peeling paint on the walls in the shower. peeling paint in shower areas
Approved Plumbing	101	39 - The hand washing fixtures are not properly installed. some faucets spray onto the floor
Mattresses and Pillows	103	49 - The mattresses are cracked and in poor condition. cracked mattresses

**Comments:**

Verbal acknowledgment of report by Dustin Locke  
Signature not required due to Covid-19  
dlocke@jdpso.org

Number Licensed For	Number in Attendance	License Anniversary	
	139	11/30/2022	
Sanitarian Name/Print Brock Smith	Phone # 337-824-2193 xt. 206	Sanitarian Signature 	R.S. # 1454

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  
D. Locke -Warden

Signature of Recipient



# BJG MONITORING REPORT

Annual

Rev. 03/22/2022 mw

**Facility Name:** Jeff Davis Parish Jail  
**BJG Team Leader & Monitors:** Major Selten Manuel, Captain Craig Pearce  
**Facility Warden & Email Address:** Commander Dustin Locke (dlocke@jdpso.org)  
**Facility Staff:**  
**BJG Inspection Date:** May 17, 2023  
**Previous BJJ Inspection Date:** June 8, 2022  
**Operational Capacity:** 180  
**Count on Day of Visit:** 148

**Concerns or Issues from the previous BJJ Monitoring Inspection:**

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	4	0	4
Number of Local Offenders	129	15	144
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
<b>TOTAL</b>	133	15	148

**Number of DOC Offenders that are:**

Single Bunked	0
Double Bunked	4
Triple Bunked	0
<b>Total</b>	4

**Number of DOC Offenders that are in Restricted Housing:**

Single Bunked	0
Double Bunked	0
Triple Bunked	0
<b>Total</b>	0

**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	0	0	0	0
July 2022	0	0	0	0
August 2022	0	0	0	0
September 2022	0	0	0	0
October 2022	0	0	0	0
November 2022	0	0	0	0
December 2022	0	0	0	0
January 2023	0	0	0	0
February 2023	0	0	0	0
March 2023	0	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
May 2022	0	0	0	0	0
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	0
December 2022	0	0	0	0	0
January 2023	0	0	0	0	0
February 2023	0	0	0	0	0
March 2023	0	0	0	0	0

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

**Living Area:** Needs to be cleaned and decluttered. Too many items left out.

- **Dorms** – Beds not made up properly. Shakedown are to be conducted daily (3- day shift, 3- night shift). This is not being done.
- **Cell Block** – In need of cleaning.

**Kitchen:** Utensils checked out to offenders without recording the number of the item or log. Some utensils had no number on them. Stock in coolers, freezer, and dry storage contained product that needs to be moved 6 inches from the wall. Utensils identified by description, such as small knife, big knife, big spoon, little spoon, etc. No accountability on tools or chemical in the kitchen. Ice cooler with no attached lid placed under bagged food items. Ice scoop stored in ice cooler.

**Bathrooms:** Showers need cleaning. Chemical control needed. Offender had entirely too much bleach in mop bucket. Bleach vapors made breathing difficult. Parish dorm had containers with no labels. Offenders said liquid in unlabeled containers was water.

**Yard Areas:** Day room used for recreation. Police Jury has not made requested improvements (place a top on it and repair 18" gap between wall and fence) to outdoor recreation area.

**Maintenance:** Jeff Davis Parish is responsible for all maintenance issues. Main entrance to the facility in need of cleaning.

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

- I-A-001 Safety/Sanitation/Inspections: Compliant** – An inspection schedule is established and conducted/logged by staff/officers. Fire Marshal inspection report is current, dated 4/12/2023. DHH inspection report is current, dated 11/30/2022. Water temperatures monitored and maintained by maintenance. The maintenance supervisor conducts monthly inspections.
- I-C-001 Emergency Plan: Compliant** – All staff members trained on the emergency plan approved by DPS&C and is reviewed and revised on an annual basis.
- II-A-007 Counts: Compliant** – Count System is established and logs are maintained on all forward counts and all stick out counts.
- How many formal counts are conducted each shift? 3-Day shift, 3-Night shift
  - How many counts are conducted each day? 6
  - **Stick outs counts** are counts that are 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 are to actually see the offender before turning in these counts.
    - How does the facility accomplish this?  
Officers count in place. Work crews call counts into the office.
    - Does this process insure accountability and safe/secure operation of the facility?  
Yes
- II-A-008 Offender Population Management System: Compliant** – Proper documentation maintained on all offenders
- II-A-010 Admissions: Compliant** – Offenders searched upon admission and any property/possessions taken and inventoried. Medical/mental health screens performed, and photos and fingerprints recorded.
- II-A-012 Classification System: Compliant -**  
Does this facility have any trustees that work outside the secure perimeter?  
Yes
- If yes, where?  
Around the facility and inside city and parish limits.
- **What is their classification process to determine who is eligible for trustee status?**  
Offenders screened by the Warden for trustee status. Status is determined by consideration of offense(s), time to serve remaining, prior escape attempts, and conduct during time served.
  - **Does their classification process meet DPS&C, Corrections Services' criteria?**  
Yes
- II-A-019 Offender Transfers: Compliant** – Offenders are transported according to policies and procedures established.
- II-A-020 Frequency of Cell Checks: Non-Compliant** – **An established procedure exists, however, per Warden, neither he, nor his staff are conducting cell checks, as the established procedure outlines.**

- II-B-002-1      **Use of Restraints for Pregnant Offenders: Compliant** – This facility does not house female DOC offenders. Facility houses female local offenders only, and restraints not used on them.
- II-C-001      **Procedures for Searches: Compliant** - Staff properly trained on policy/procedure regarding offender searches. Offender searches performed in compliance with policy/procedure.
- II-D-001      **Key, Tool, and Utensil Control: Non-Compliant** – Utensil and tool control could be improved upon. Utensils/tools need to be labeled in a way that cannot be altered. An accurate record of check-out/check-in needs to be established in order to regain accountability and control
- III-A-001 **Rules and Discipline: Facility not responsible for these procedures**
- Does the facility's offender orientation include the application process for applying for restoration of good time? No
  - What is their restoration of good time application process for the offender population? This facility is not responsible for these procedures does not process these applications.
  - Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? This facility is not responsible for these procedures does not process these applications. Offenders are transferred to a facility offering coursed for restoration of good time.
- IV-C-001      **Access to Care/Clinical Services** (Does the facility charge a co-payment? Approved by DPS&C?) **Compliant** – Offenders receive information of accessing health care services and co-pay information upon orientation.
- IV-C-006-1      **Pregnancy Management: Compliant** – This facility does not house female DOC offenders.
- IV-C-008      **Annual TB Testing: Compliant** - TB tests conducted at intake and annually for offenders
- IV-C-012      **Access to Sick Call: Compliant** – Facility complies with approved policy/procedure/practice of initiating and conducting sick calls. Sick calls are available to offenders provided by personnel licensed in their specific profession.
- IV-C-013      **Infirmiry Care: Compliant** – On-site first aid provided for non-emergency and minor medical issues or conditions.
- IV-C-013-1      **Medical Releases: Compliant – Compliant** – No medical releases since last inspection.
- IV-C-014      **Suicide Prevention and Intervention: Compliant** – Health records maintained on offenders and documentation of staff training and observation of suicide watched logged. Written policy/procedure adhered to and staff trained annually.
- IV-C-016      **Notification: Compliant** – Staff notifies medical of all requests from offenders
- IV-D-004      **Confidentiality of Health Information: Compliant** – An approved policy/procedure is established, providers are licensed, and records maintained confidentially.
- IV-E-001      **Alleged and Substantiated Sexual Assaults: Compliant** – Facility is PREA compliant with PREA trained staff member. Warden Locke has never had a PREA case.

**V-A-003 Programs and Services: Complaint** – No programs/services offered to offenders at this time.

- List all Certified Treatment Programs (Attach Form IS-B-8-b)
- List all other Offender Programs  
Encouraged Warden to start offering programs. If offender desires/requests classes, Warden transfers then to a facility offering these programs.

**V-A-003-1 Educational Programming**

**GED Program**

Number of GED Slots	<u>0</u>
Number of Participants	<u>0</u>
YTD Number of Completions	<u>0</u>

**V-C-001 Releasing Offenders: Compliant** – Personal property returned to all released offenders. Offenders released with a prescription for a 5-day supply of medication along with instructions on how to obtain medication upon release. Offenders released with two valid forms of ID.

**V-B-010 Proposed Expansions: Compliant** – No proposed expansion ta this time

**V-C-001 Substance Abuse Programs: Compliant** – Facility does not offer substance abuse programs. If offender desire to participate in a substance abuse program, the offender is transferred out.

**V-C-002 Reentry Programs** (Are offenders releasing with two valid forms of identification?) **Compliant** – Facility participates in the Standardized Pre-Release Curriculum. Offenders provided two forms of ID and given a reference guide to community resources.

**V-C-004 Parole Board Procedures: Compliant** – Parole hearings are conducted through Zoom only

**VI-B-002 Grievance Process: Compliant** –

- Does grievance process include at least two levels of review? Video-Request Kiosk
- Who is the designee at each level of review? Jail Supervisor, Assistant Warden, Warden
- What is the specified time for response at each level? 4 day response

**VII-A-002 Weapons Training: Compliant** – Training records reflect compliance of all personnel authorized to carry firearms and less-than-lethal weapons to reflect competency.

**VII-B-008 Monthly Reporting: Compliant** – Reports are submitted in a timely manner. No issues to note form 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
May 2022	3	3	100%	0
June 2022	3	3	100%	0
July 2022	3	3	100%	0
August 2022	3	3	100%	0
September 2022	3	3	100%	0
October 2022	3	3	100%	0
November 2022	3	3	100%	0
December 2022	3	3	100%	0
January 2023	3	3	100%	0
February 2023	3	3	100%	0
March 2023	3	3	100%	0

**Mandatory Areas of Review for BJJ Compliance**

- I-A-001 Safety/Sanitation/Inspections (MANDATORY) – Compliant** - An inspection schedule established and conducted/logged by staff/officers. Fire Marshal inspection report is current, dated 4/12/2023. DHH inspection report is current, dated 11/30/2022. Water temperatures monitored and maintained by maintenance. The maintenance supervisor conducts monthly inspections.
- I-C-001 Emergency Plan (MANDATORY) – Compliant** – All staff members trained on the emergency plan approved by DPS&C and is reviewed and revised on an annual basis.
- I-C-003 Fire Safety/Code Conformance (MANDATORY) – Compliant** – Fire Marshal inspection report is current, dated 4/23/2023. 4 non-critical violations noted and verbal acknowledgement of report received from Commander Locke.
- II-A-007 Counts (MANDATORY) – Compliant** – Count System is established and logs maintained on all forward and stick out counts
- II-A-016 Photo Identification (MANDATORY) – Compliant** – Offenders provided a photo identification upon intake into the facility
- II-A-018 Offender Drug Testing (MANDATORY) – Compliant** – Drug testing conducted and reported on the monthly activity report submitted to the BJJ Leader. Minimum requirements met.
- III-A-001 Rules and Discipline (MANDATORY) – Compliant** – Offenders given a rulebook consisting of facility rules and regulations upon intake at orientation. Offenders sign acknowledgement of receipt of policy/procedure.
- IV-A-003 Food/Dietary Allowances (MANDATORY) – Compliant** – facility menus meet recommendations and required documentation maintained. Menus evaluated quarterly. Dietary allowances reviewed annually. Changes made as needed upon review.
- IV-A-006 Food Service Management (MANDATORY) – Compliant** – Written policy/procedure is established and adhered to. Record of meals served and times served.



- IV-B-001 Plumbing Fixtures - Toilets and Washbasins (MANDATORY) – Compliant** – accessible facilities are available to offenders and maintenance records maintained. Some restroom fixtures are currently in process of repair and/or sanitation.
- IV-B-002 Plumbing Fixtures - Showers (MANDATORY) – Compliant** – accessible facilities are available to offenders and maintenance records maintained. Some shower surfaces and fixtures are currently in process of repair and/or sanitation.
- IV-B-005 Personal Hygiene (MANDATORY) – Compliant** – policy/procedure established for procurement of hygiene products by offenders. Logs are maintained documenting items available and provided to offenders.
- IV-C-001 Access to Care/Clinical Services (MANDATORY) – Compliant** - Offenders receive information of accessing health care services and co-pay information upon orientation. Offender brought to Jennings Hospital for major illness or injury.
- IV-C-002 Adequate Equipment and Supplies (MANDATORY) – Compliant** – Emergency first aid is available to offenders for minor illness/injury or stabilization during the event of an emergency that cannot be treated at the facility.
- IV-C-005 24 Hour Care (MANDATORY) – Compliant** – Policy/procedure is established and a designated emergency care facility is available to offenders.
- IV-C-009 Chronic Care Program (MANDATORY) – Compliant** – Facility complies with DPS&C policy and procedure for caring for offenders with chronic conditions. If an offender has a chronic condition, he is transferred to a facility capable of providing care for that offender's condition.
- IV-C-012 Access to Sick Call (MANDATORY) - Compliant** – Facility complies with approved policy/procedure/practice of initiating and conducting sick calls. Sick calls are available to offenders provided by personnel licensed in their specific profession.
- IV-C-014 Suicide Prevention and Intervention (MANDATORY) – Compliant** – Health records maintained on offenders and documentation of staff training and observation of suicide watched logged. Written policy/procedure adhered to and staff trained annually.
- IV-C-015 Offender Deaths (MANDATORY) – Compliant** – Staff trained on policy/procedure of written notification and reporting requirements regarding offender deaths. Documentation submitted and maintained accordingly. No deaths reported since last visit.
- IV-D-007 Internal Review/Quality Assurance (MANDATORY) – Compliant** – Facility adheres to policy/procedure for evaluation of major risk management events. Evacuation routes are posted throughout the facility.
- V-A-005 Exercise and Recreation Access (MANDATORY) – Compliant** – Offenders have adequate access to recreation areas. The outdoor recreation area needs to have the requested improvements made to allow for adequate outdoor recreation for offenders.
- VI-B-002 Grievance Process (MANDATORY) – Compliant** – Offenders have reasonable access to grievance remedy

procedure with at least two levels of review.

**STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:** Appears to be good rapport among staff.

**OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:** Offender quality of life appears to be satisfactory.

**RECOMMENDATION:** Most important, cell checks and rounds need to be completed at the outlined times by staff and/or Warden. Improvements can be made in the facility. Dorms need decluttering and bathrooms/showers need to be cleaned. Kitchen needs to improve inventory check-out/check-in process, by labeling utensils and tools and focusing on logging them in and out. Clear property bags should be used for inmate personal property storage, instead of milk crates. There are currently 200 pairs of restraints that need to be inventoried. Flammable cans need to be store in the flammable cabinet.

**Based on the review and inspection of the facility, it is my recommendation the Jeff Davis Parish Jail be re-evaluated in 30 days to establish compliance. Upon re-evaluation and finding of compliance, I would recommend certification (under waiver status) with continued semi-annual inspections.**