## Department of Public Safety & Corrections State of Louisiana



January 12, 2024

JAMES M. LE BLANG Secretary

A

# MEMORANDUM

JEFF M. LANDRY

GOVERNOR

TO:The Honorable Joseph P. Lopinto IIISheriff of Jefferson 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 Jefferson Parish Correctional Center on December 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/mk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Sue Ellen Monfra, Deputy Chief, Jefferson Parish Correctional Center Seth Smith, Chief of Operations Donnie Bordelon, Warden EHCC Aaron Hooper, BJG Team Leader



# BASIC JAIL GUIDELINES MONITORING REPORT

\_x\_Annual, \_\_\_\_ Semi-Annual, \_\_\_\_ Quarterly, \_\_\_\_ Monthly, or \_\_\_ Recert with Waiver

Ver. 11/28/2023 mwk

Facility Name:	Jefferson Parish Correctional Center
BJG Team Leader & Monitors:	Major Aaron Hooper
Facility Warden & Email Address:	Deputy Chief Sue Ellen Monfra - monfra_sm@jpso.com
Facility Staff:	Captain Bryan Bordelon
BJG Inspection Date:	12/12/2023
Previous BJG Inspection Date:	12/16/2022
Operational Capacity:	1085
Count on the Day of Visit:	881

## List Concerns or Issues from the previous BJG Monitoring Inspection:

V-B-001 Programs and Services

V-B-002 Educational Programming

## Count on the Day of Visit:

	# MALE	# FEMALE	TOTAL
Number of DOC Inmates	85	18	103
Number of Local Inmates	703	75	778
Number of Out of State Inmates	0	0	0
Number of Federal Inmates	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	788	93	881

### Number of DOC Inmates that are:

Single Bunked	8
Double Bunked	40
Triple Bunked	55
Total	103

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

Single Bunked	0
Double Bunked	2(Disciplinary)
Triple Bunked	0
Total	2

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

Month/Year	Inmate/Inmate	Inmate/Inmate w/ Significate Injury	Inmate/Staff	Inmate/Staff w/ Significate Injury
12/2022	0	0	0	0
01/2023	0	0	0	0
02/2023	0	0	0	0
03/2023	0	0	0	0
04/2023	0	0	0	0
05/2023	0	0	0	0
06/2023	0	0	0	0
07/2023	0	0	0	0
08/2023	0	0	0	0
09/2023	0	0	0	0
10/2023	0	0	0	0
11/2023	0	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
12/2022	0	0	0	0	1
01/2023	0	0	0	0	1
02/2023	0	0	0	0	1
03/2023	0	0	0	0	1
04/2023	0	0	0	0	1
05/2023	0	0	0	0	1
06/2023	1	0	0	0	1
07/2023	0	0	0	0	1
08/2023	0	0	0	0	1
09/2023	0	0	0	0	1
10/2023	0	0	2	0	1
11/2023	0	0	0	0	1

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

### Living Area

Overall the living areas were found to be clean, organized and odor free.

- Dorms -Dorm areas were in order and found to be clean and odor free. Offenders' property was stored in living area.
- Cell Block Cell block areas were clean and odor free

**Culinary/Dining**: Contracted out and employed by Summit, Jefferson Parish provides deputies for security. The tools and sharp objects were controlled on an inventoried locked shadow board in a locked room. Cabling is used when knives are checked out. Dry storage had all items labeled and stored 6" off the ground. Sample meal trays were labeled and stored for at least the last three meals served. Cooler and freezer areas were found in good order besides some eggs on top of other foods, they were moved around at time off inspection. Temperature on cooler and freezers are logged daily.

**Bathrooms**: Bathrooms are clean and odor free, contained hand soap and paper towels. Checked water, hot water works.

**Yard Areas**: Yard and recreation areas were adequate. Documentation provided reflects that recreation was occurring on a regular three times per week, weather permitting.

**Maintenance**: Facility has own staff maintenance personnel daily. Tool inventory is kept up daily. MSDS forms are well maintained and correct.

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

I-A-001	Safety/Sanitation/Inspections (MANDATORY): Compliant Weekly sanitation inspections are conducted. Fire Marshall and Department of Health inspections are done yearly. All deficiencies have been addressed
I-C-001	<b>Emergency Plan (MANDATORY):</b> Compliant An emergency plan is in place. Employees are trained and knowledgeable of the plans. Emergency plan exit maps are posted throughout the facility.
I-C-003	Fire Safety/Code Conformance (MANDATORY): Compliant Facility has documentation for the fire alarm maintenance being tested and checked.
II-A-006	<b>Staff Log (MANDATORY):</b> Compliant Logs are placed in all areas of the facility and contain the required information. Facility forms are completed for notification of incidents to the administration.
II-A-007	<ul> <li>Counts (MANDATORY):</li> <li>How many formal counts are conducted each shift? <ul> <li>3</li> </ul> </li> <li>How many counts are conducted each day? <ul> <li>5</li> </ul> </li> <li>Stickouts counts</li> <li>How does the facility accomplish this? <ul> <li>Pass-On information is recorded in the Living Area Log Books listing where inmates are physically located.</li> <li>Officers call areas inside facility where the inmates are located for reassurance.</li> </ul> </li> <li>Does this process ensure accountability and safe/secure operation of the facility? <ul> <li>Yes</li> </ul> </li> </ul>
II-A-008	Inmate Population Management System: Compliant All information is documented and maintained on each offender and is transferred with the offender if transferred out of the facility.
II-A-010	Admissions: Compliant Policy and procedure are in place and all admission forms are thorough and completed.
II-A-012	<ul> <li>Classification System:</li> <li>Does this facility have any trustees that work outside the secure perimeter? Yes If yes,</li> <li>What is their classification process to determine who is eligible for trustee status? <ul> <li>Inmates are screened by the Security and Investigations section. Their criminal history, sentence and disciplinary history are taken into account. The Medical section also must give clearance to be able to work as a trustee.</li> <li>Does their classification process meet DPS&amp;C, Corrections Services' criteria? Yes</li> </ul> </li> </ul>

- **II-A-016 Photo Identification (MANDATORY):** Compliant Upon admission, all offenders receive institutional ID cards.
- **II-A-018** Inmate Drug Testing (MANDATORY): (List monthly since the previous BJG monitoring visit.) This facility does not conduct drug tests of DOC offenders. Their position has been and continues to be, they only house pretrial and new arrest offenders and do not house DOC offenders for very long.

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
12/2022	0	0	0	0
01/2023	0	0	0	0
02/2023	0	0	0	0
03/2023	0	0	0	0
04/2023	0	0	0	0
05/2023	0	0	0	0
06/2023	0	0	0	0
07/2023	0	0	0	0
08/2023	0	0	0	0
09/2023	0	0	0	0
10/2023	0	0	0	0
11/2023	0	0	0	0

## II-A-019 Offender Transfers: Compliant

The Facility is using the correct forms in place for the offender transfers.

## II-A-020 Cell Checks (MANDATORY): Compliant

The facility's procedures advise the officer to make rounds every 15 - 30 minutes in these areas. Logbook documentation was provided and was observed to contain that rounds were being conducted at these times.

## II-B-002-1 Use of Restraints for Pregnant Offenders: Compliant

The facility's policy is compliant with DOC Regulation.

## II-C-001 Procedures for Searches Compliant

The facility conducts visual body searches on all offenders upon intake and when offenders return to the facility. The facility keeps detailed shakedowns and daily search logs on file. Procedures are in place and logs are maintained on all searches.

## II-D-001 Key, Tool, and Utensil Control (MANDATORY): Compliant

The facility's tools, key and utensil control were found to be in good order. Inventories and documentation are kept up daily. A shadow board with a lock in key for the culinary utensil is being used.

## III-A-001 Rules and Discipline (MANDATORY):

- Does the facility's offender orientation include the application process for applying for restoration of good time?
  - The JPCC does not house DOC inmates. Inmates who receive DOC sentences are shipped to other facilities that house DOC inmates at the Department of Correction's discretion. The inmates sentenced to Parish Prison sentences are all given good time in their sentence calculations.
- What is their restoration of good time application process for the offender population?
   N/A
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? N/A

- **IV-A-003 Food/Dietary Allowances (MANDATORY):** Compliant Contract with Summit Foods, they have a qualified nutritionist and dietician.
- IV-A-006 Food Services Management (MANDATORY): Compliant Written policy in place, two hot meals daily, sample trays stored in cooler for 3 days.
- **IV-B-001 Plumbing Fixtures Toilets & Washbasins (MANDATORY):** Compliant Offenders have access to appropriate toilets and washbasins.
- IV-B-002 Plumbing Fixtures Showers (MANDATORY): Compliant The water temperatures were observed to be appropriate.
- IV-B-005 Personal Hygiene (MANDATORY): Compliant Offenders are provided with adequate supplies necessary for maintaining personal hygiene.
- **IV-C-001** Access to Care/Clinical Services (MANDATORY) (Does the facility charge a co-payment? If so, approved by DPS&C?): Compliant There is a computer system in each dorm that lets the offenders log on and can see all necessary information on assessing health care and the co-pay requirements. Co-pays are approved by DPS&C.
- IV-C-003 Provision of Treatment (MANDATORY): Compliant Polices in place.
- IV-C-005 24 Hour Care (MANDATORY): Compliant Offenders have access to 24 hour care.
  - **IV-C-006-1 Pregnancy Management (MANDATORY):** Complaint The facility's policy is compliant with DOC Regulation.
  - **IV-C-008** Annual TB Testing: Compliant The facility conducted TB testing on all offenders at no cost to the offender. This is done upon intake and annually.
  - IV-C-009 Chronic Care Program (MANDATORY): Compliant
- **IV-C-012** Access to Sick Call (MANDATORY): Sick call forms are available on all kiosk machines in all dorms and offenders have access to them 24/7. Once completed they are emailed straight to the medical department. The requests are triaged and scheduled for visits.
- IV-C-013 Infirmary Care: Compliant The facility has a 24/7 medical care service. There is a nurse at the facility 24/7. If medical staff determines the health issues to be an emergency, offenders are transported to the local hospital.
- IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): Compliant.
- IV-C-014 Suicide Prevention and Intervention (MANDATORY): Compliant Mental health staff evaluates each offender and determines the treatment. The staff receives annual suicide prevention training.
- IV-C-015 Inmate Deaths (MANDATORY): Compliant Facility has a policy in place for actions to be taken in the event of an offender's death
- **IV-C-016** Notification: Compliant Policies in place to notify family members if the offender is on ICU.

- IV-D-001 Healthcare Quarterly Meetings (MANDATORY): Compliant Medical meets at least quarterly.
- IV-D-004 Confidentiality of Health Information/Individual Health Record: Compliant Access to offender medical information/files are controlled and restricted to those who have legal authority. Medical records are stored in a secured restricted area and are transported with the offender upon transfer to another local facility or to DPS&C.
- IV-D-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY) Complaint
- IV-D-007 Internal Review/Quality Assurance (MANDATORY): Compliant Policy is in place for internal reviews upon conclusion of a serious event.
- IV-E-001 Alleged and Substantiated Sexual Assaults: Compliant
- V-A-004 Religious Programs: Compliant
- V-A-005 Exercise & Recreation Access (MANDATORY): Compliant Documentation provided reflects that recreation was occurring on a regular three time per week, weather permitting.

## V-B-001 Programs and Services:

- List all Certified Treatment Programs (Attach Form IS-B-8-b)

   None
- List all other Offender Programs
  - Alcoholics Anonymous
  - Narcotics Anonymous
  - Female Trauma Group Religious Programs
- V-B-002 Educational Programming: Non-Compliant

### **GED** Program

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

- V-B-003 Substance Abuse Programs: Compliant Alcoholics Anonymous Narcotics Anonymous
- V-C-001 Releasing Offenders: Compliant Offenders are released with property and identification that was collected upon intake. Offenders are also released with prescribed medications.
- V-C-002 Regional Reentry Programs (Are offenders releasing with two valid forms of identification?): Offenders are releasing with two valid forms of identification.
- V-C-004 Parole Board Procedures: Compliant

## VI-B-002 Grievance Process (MANDATORY):

- Does the grievance process include at least two levels of review?
  - Yes Three step process
- Who is the designee at each level of review?
  - First responder is typically the Section Commander of the section pertaining to the complaint.
  - o Second Responder is typically the Administrative Major or Captain.
  - o The Third Responder is typically the JPSO Attorney.
- What is the specified time period for response at each level?
  - o POST III Trained ARP guidelines
    - Step 1 reply must be within 15 days from the time the grievance was referred by the Administration.
    - Step 2 reply must be made within 25 days of receipt of inmate's request for Administrative Review of Step 1 Response.
    - Step 3 reply must be made within 40 days of receipt of inmate's request for Administrative Review of Step 2 Response.

VII-A-002 Weapons Training: Weapons Training - Compliant Deputies are POST certified and receive appropriate training regarding the use of handling and retention of weapons.

- VII-B-010 Monthly Reporting: Compliant Facility turns in all monthly reports in a timely manner. All reports are accurate and detailed.
- VII-B-012 Proposed Expansions: Compliant No expansions at this time.

## STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff overall morale was good and seem to be working together towards common goals. All employees conducted themselves professionally and respectfully.

## OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

No complaints made by any offender during the walk through. Talked to the offenders working in the kitchen, they liked the quality of the food and made no complaints.

## **RECOMMENDATION:**

- V-B-001 Programs and Services
- V-B-002 Educational Programming

At this time, continued annual monitoring visits are recommended.

# Jefferson Parish Sheriff's Office



## **INTER-OFFICE MEMORANDUM**

To: BGJ Audit Folder	Dept.:	Date: 12/11/2023
From: Capt. Bryan Bordelon #111125	Dept.: JPCC Administration	CC:

Subject: Fire Marshal Inspection

The State Fire Marshal Inspection for the Jefferson Parish Correctional Center was conducted on Thursday, 12/07/2023. We have not received the Inspection Report from the Office of State Fire Marshal as of present date. Once the JPCC receives the Inspection Report from the State Fire Marshal, a copy will be furnished to the DOC Team Leader and copies will be placed into their respective BJG Audit Folders

Respectfully

Captain Bryan Bordelon #111125 Assistant Deputy Administrator Jefferson Parish Correctional Center



## Retail Food Notice of Violations

Routine/Renewal

Permit Number 26-0002546	Permit Name JEFFERSON PARISH CORRECTIONAL CENTER (DIETARY)		
Name of Establishment JEFFERSON PARISH CORRECTIONAL CENTER	Owner Name SUMMIT FOOD SERVI	CELLC	
Address 100 DOLHONDE ST GRETNA. LA 70053	Date 06/22/2023	Time 10:10 AM	

## LAC TITLE 51 PART XXIII

Category	Code Reference	Description of Violations
FOOD SAFETY CERTIFICATION	305	23 - 305 - A current state food safety certificate is not held by the owner or a designated employee of the establishment.
TOXIC CHEMICALS	3903	34 - 3903 - Chemicals are stored with above food, equipment, utensils, linens, single-service or single u articles. [COS]

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 <sup>,</sup>	Code Reference	Description of Violations
FOOD PROTECTION	1501	54 - 1501.1 - Food is not stored in a clean, covered container. [COS]
PERSONNEL, CLOTHES, HAIR RESTRAINTS, PRIVATE WELL TESTING	3903	92 - 3903 - Employees' personal care items are stored where food equipment, utensils, linens, single service items or single use items may be contaminated. [COS]
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.8 - The hand wash lavatory is used for purpose other than hand washing. [COS]
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3101	102 - 3101 - Plumbing is not maintained. 3 compartment sink spray nozzle leaking [Repeat]
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.4 - Walls/ceilings or attached equipment are not in good repair. Wall behind restroom door
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.3 - Walls/ceilings or attached equipment are not clean. Dust throughout ceilings [COS]
MISCELLANEOUS	2703	118 - 2703 - Water under pressure is not provided to all fixtures or equipment that is required to use water. Low water pressure at hand sink
MISCELLANEOUS	4119	120 - 4119.2 - Mops are not hung and/or stored to facilitate air drying. [COS]

### Comments:

Kendra.washington@summitfoodservice.com

Please visit eatsafe.la.gov for the gold seal food safety certificate application

### 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 Jacob Lacaze	Phone # 504-838-5140	Sanitarian Signature	R.S. # 3232	
The above mentioned viol Correct Critical Violations	-	attention and were explained to m Correct Non-Critical Vio		-
Name/Title Kendra Washington/Kitch	en Manager	Signature of Recipient	and and a second and	-



## Detention or Incarceration Notice of Violations

 Routine/Renewal

 Permit Number
 Permit Name

 26-10-224
 Jefferson Parish Community Correctional Center Annex-224

 Name of Establishment
 Owner Name

 Jefferson Parish Community Correctional Center Annex-224
 JEFFERSON PARISH CORRECTINAL CENTER

 Address
 Date
 Time

 100 DOLHONDE AVE GRETNA, LA 70053
 07/19/2023
 10:45 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	5 - The floors are not smooth and easily cleanable. Annex A
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair. Annex A, hand sink runs continuously. Annex D sink is clogged, and sink in new dorm

### Comments:

Buckelew\_cl@jpso.com

Number Licensed For		Number in Attendance 100	License Anniversary 06/30/2023	
Sanitarian Name/Print	Phone #	Sanitarian Signature	R.S. #	
Jacob Lacaze	504-838-5140	YX	3232	
The above mentioned violations v	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



## Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number	Permit Name			
26-11-224	Jefferson Parish Community Co	orrectional Center(North)-224		
Name of Establishment Jefferson Parish Community Corr	ectioanl Center(North)-224	Owner Name JEFFERSON PARISH CO	DRRECTIONAL CENTER	
Address 100 DOLHONDE AVE GRETNA	, LA 70053	Date 07/19/2023	Time 10:45 AM	
		E SI DA DE MAN	**	

## 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	Description of Violations	
	Reference		
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair. Sink clogged in 4d, low water pressure in 4c,	

### **Comments:**

Buckelew\_cl@jpso.com

Number Licensed For		Number in Attendance	License Anniversary 06/30/2023
5.		373	
Sanitarian Name/Print	Phone #	Sanitarian Signature	R.S. #
Jacob Lacaze	504-838-5140	82	3232

Correct Critical Violations by

Correct Non-Critical Violations by



## Detention or Incarceration Notice of Violations

 Routine/Renewal

 Permit Number
 Permit Name

 26-05-224
 Jefferson Parish Community Correctional Center(South)-224

 Name of Establishment
 Owner Name

 Jefferson Parish Community Correctional Center(South)-224
 JEFFERSON PARISH CORRECTIONAL CENTER

 Address
 Date
 Time

 100 DOLHONDE AVE GRETNA, LA 70053
 07/19/2023
 10:45 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	7 - There is peeling paint on the walls in the shower. 3H, 3G, 2H, 1E [Repeat]
Insect and Rodent Protection	101	8 - All outer openings are not properly protected against the entrance of insects/rodents. Flies noted in 3f shower and 1H
Approved Bathing Facilities	101	24 - There is chipped tile in the shower area. 2F
Matresses and Pillows	103	49 - The mattresses are cracked and in poor condition. 4G

#### **Comments:**

Buckelew\_cl@jpso.com

Number Licensed For		Number in Attendance	License Anniversary
		539	06/30/2023
Sanitarian Name/Print	Phone #	Sanitarian Signature	R.S. #
Jacob Lacaze	504-838-5140	17	3232

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

# **Response to Health Inspection Deficencies**

The following is a list of health Inspection issues and the dates they were addressed.

On 7-20-23 items one through four were addressed.

- 1) 4DR Dayroom sinks unclogged
- 2) 4AR Dayroom sinks unclogged and water adjusted
- 3) 4CR Dayroom water adjusted
- 4) 3E Sprayed for flies

On 7-21-23 items five through nine were addressed.

- 5) 2E No problem found with toilet
- 6) 2F No problem found with shower
- 7) 1H Sprayed for flies
- 8) 1F Sprayed for flies
- 9) 1G Changed water line