

DEPARTMENT OF PUBLIC SAFETY & CORRECTIONS
STATE OF LOUISIANA

JEFF M. LANDRY
GOVERNOR

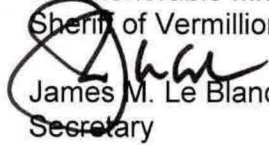



JAMES M. LE BLANC
SECRETARY

March 11, 2024

MEMORANDUM

TO: The Honorable Michael A. "Mike" Couvillion
Sheriff of Vermillion 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 Vermillion Parish Correctional Center.

Please note on page 7, the recommendations suggested by BJJ Team Leader, Major Selten Manuel and his team.

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 BJJ process.

JML/mk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association
Kirk Frith, Colonel, Vermillion Correctional Center
Seth Smith, Chief of Operations
E. Dustin Bickham, Warden, DCI
Selten Manuel, BJJ Team Leader



BJG MONITORING REPORT

Annual

Rev. 03/22/2022 mw

Facility Name: Vermillion Parish Correctional Center
BJG Team Leader & Monitors: Major Selten Manuel, Captain Craig Pearce
Facility Warden & Email Address: Colonel Kirk Frith (kirk@vpso.org), Captain Troy Hebert
Facility Staff: Lieutenant Anthony Klorer, Sergeant JC Hebert, Corporal John Broussard
BJG Inspection Date: August 16, 2023
Previous BJJ Inspection Date: October 19, 2022
Operational Capacity: 150
Count on Day of Visit: 125

Concerns or Issues from the previous BJJ Monitoring Inspection:

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	25	0	25
Number of Local Offenders	90	10	100
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	115	10	125

Number of DOC Offenders that are:

	5
Single Bunked	_____
	20
Double Bunked	_____
	0
Triple Bunked	_____
	25
Total	_____

Number of DOC Offenders that are in Restricted Housing:

	0
Single Bunked	_____
	0
Double Bunked	_____
	0
Triple Bunked	_____
	0
Total	_____

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

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
October 2022	0	0	0	0
November 2022	1	0	0	0
December 2022	1	0	0	0
January 2023	1	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	2	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
October 2022	0	0	0	0	3-extra uniforms, towels, blankets
November 2022	0	0	0	0	3-extra uniforms, towels, blankets
December 2022	0	0	0	0	3-extra uniforms, towels, blankets
January 2023	0	0	0	0	3-extra uniforms, towels, blankets
February 2023	0	0	0	0	3-extra uniforms, towels, blankets
March 2023	0	0	0	0	4-extra uniforms, towels, blankets, lighter
April 2023	0	0	0	0	3-extra uniforms, towels, blankets
May 2023	0	0	0	0	5-extra uniforms, towels, blankets, lighter, paper
June 2023	0	0	0	0	4-extra uniforms, towels, blankets, paper from offender transports
July 2023	0	0	0	0	4-extra uniforms, towels, blankets, lighter

GENERAL APPEARANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY:

Living Area: Living areas are quiet, clean, in good working order, free from odor or clutter.

- **Dorms** – Dorms are generally clean, orderly, and free from odor. Evacuation route posted.
- **Cell Block** – Cellblock is clean, orderly, and free from odor.

Kitchen: Food preparation area and dining hall are clean with no odors or uncleanliness detected. All sharps accounted for.

Bathrooms: Bathrooms are clean and free from odor with functional plumbing and access to hot/cold water.

Yard Areas: Offenders have access to weights. Space provided for walking and jogging. Adequate space provided for indoor/outdoor recreation.

Maintenance: No maintenance issues to address at time of inspection

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

I-A-001 **Safety/Sanitation/Inspections: Compliant** – Weekly sanitation inspections conducted in all areas. Current copies of Fire Marshal Inspection (4/5/2023) and DHH Inspection (3/27/2023) are on file.

I-C-001 **Emergency Plan: Compliant** – All staff members are adequately trained on the emergency plan established by the Warden. Manual reviewed by the FM Chief. Once reviewed and approved, he signs off on it, and is picked up from FM.

- II-A-007** **Counts: Compliant –**
- How many formal counts are conducted each shift? Four (4) counts conducted during day shift. Counts (12) conducted hourly during night shift.
 - How many counts are conducted each day? 16 counts are conducted daily
 - **Stick outs counts**
 - How does the facility accomplish this? Offenders counted in place, such as in kitchen, maintenance, laundry, etc.
 - Does this process ensure accountability and safe/secure operation of the facility? Yes
- II-A-008** **Offender Population Management System: Compliant –** Required documentation maintained on all DOC offenders
- II-A-010** **Admissions: Compliant –** Upon admission to the facility, all offenders searched, their property inventoried and stored. Mental and medical health assessments conducted, and photographs and fingerprints taken.
- II-A-012** **Classification System: Compliant -**
Does this facility have any trustees that work outside the secure perimeter?
No trustees work outside the perimeter
- II-A-019** **Offender Transfers: Compliant –** Proper notifications made when an offender is transferred to another facility within guidelines and documentation maintained on the offender transfer.
- II-A-020** **Frequency of Cell Checks: Compliant –** Cells checked a total of 16 times daily
- II-B-002-1** **Use of Restraints for Pregnant Offenders: Compliant –** This facility does not house female DOC offenders. As soon as a female parish offender becomes DOC, she is transferred out.
- II-C-001** **Procedures for Searches: Compliant –** A written policy and procedure established regarding searches. Logs maintained reflecting searched of offenders and staff, as well as dorms, cells, perimeter, and property.
- II-D-001** **Key, Tool, and Utensil Control: Compliant –** All items accounted for and logs/inventories accurate.
- III-A-001** **Rules and Discipline:** Facility enforces all rules and procedures.
- Does the facility's offender orientation include the application process for applying for restoration of good time? No (Facility will be adding information on this procedure to rulebook and kiosk.)
 - What is their restoration of good time application process for the offender population? If offender has a question or concern regarding good time, offender fills out an ARP and mails it to DOC.
 - Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes
- IV-C-001** **Access to Care/Clinical Services** (Does the facility charge a co-payment? Approved by DPS&C?) **Compliant –** Facility charges a co-payment approved by DPS&C for medical services
- IV-C-006-1** **Pregnancy Management: Compliant –** This facility does not house female DOC offenders. As soon as a female parish offender becomes DOC, offender transferred out.
- IV-C-008** **Annual TB Testing: Compliant –** Annual TB testing conducted at no cost to the offender.
- IV-C-012** **Access to Sick Call: Compliant –** A nurse is on call 24 hours a day. Offenders complete a request and place it in a locked box for medical to pick up. The offender then scheduled to see medical staff as needed.

- IV-C-013** **Infirmiry Care: Compliant** – An on-site infirmiry is accessible to offenders for minor medical needs.
- IV-C-013-1** **Medical Releases: Compliant – Compliant** – Approved policy and procedure established regarding medical releases in accordance with DPS&C guidelines. There have been no medical releases since the last inspection.
- IV-C-014** **Suicide Prevention and Intervention: Compliant** – The facility uses a written suicide prevention and intervention policy established by the Colonel and approved by mental health staff.
- IV-C-016** **Notification: Compliant** – Policy and procedures established in regards to notification of family and visitation with an offender admitted to ICU or a trauma center in accordance with DPS&C guidelines. Documentation of any such occurrence maintained.
- IV-D-004** **Confidentiality of Health Information: Compliant** – Access to offender’s medical records requires approval by facility medical staff. Medical records maintained separately from institutional records. Offenders must sign an authorization form to allow the release of specific medical information.
- IV-E-001** **Alleged and Substantiated Sexual Assaults: Compliant** – No PREA allegations to report since last inspection
- V-A-003** **Programs and Services: Complaint** –
- List all Certified Treatment Programs (Attach Form IS-B-8-b)
 - List all other Offender Programs
 - Substance Abuse
 - Vo-Tech
 - Pre-Release Program
 - Mental Health
 - Religion-For All Offenders
 - Catholic Services
- V-A-003-1** **Educational Programming (currently suspended due to lack of an instructor)**
- | | |
|---------------------------|---|
| GED Program | |
| Number of GED Slots | 0 |
| Number of Participants | 0 |
| YTD Number of Completions | 0 |
- V-B-001** **Releasing Offenders: Compliant** – Personal property of offenders returned to all released offenders along with any remaining medication. Offenders are given a 5-day supply of medication along with instructions on how to obtain medication once released.
- V-B-010** **Proposed Expansions: Compliant** – No proposed expansions scheduled at this facility.
- V-C-001** **Substance Abuse Programs: Compliant** – Substance abuse program offered to offenders conducted by Brandon Mitchell.
- V-C-002** **Reentry Programs** (Are offenders releasing with two valid forms of identification?) **Compliant**
- V-C-004** **Parole Board Procedures: Compliant** – Policies and procedures established related to the presence of the Colonel or his designee at parole board hearings. Documentation of any such occurrence maintained.

- VI-B-002 Grievance Process: Compliant**
- Does grievance process include at least two levels of review? Yes
 - Who is the designee at each level of review? 1st level-Sgt. JC Hebert, 2nd Level-Lt. Anthony Klorer
 - What is the specified time for response at each level? 15 days at first level, 25 days at second level

VII-A-002 Weapons Training: Compliant – Weapons training conducted annually.

VII-B-008 Monthly Reporting: Complaint – Sent to BJJ Leader by the 10th of each month. Reports submitted in a timely manner with no significant issues noted.

II-A-018 Offender Drug Testing (Please list monthly since the previous BJJ monitoring visit.)

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
October 2022	5	42	11.9%	0
November 2022	5	36	13.9%	0
December 2022	5	30	16.7%	0
January 2023	5	24	20.8%	0
February 2023	5	24	20.8%	0
March 2023	5	30	16.7%	0
April 2023	5	28	17.9%	0
May 2023	5	33	15.2%	0
June 2023	5	29	17.2%	0
July 2023	5	31	16.1%	0

Mandatory Areas of Review for BJJ Compliance

I-A-001 Safety/Sanitation/Inspections (MANDATORY) – Compliant – Inspections are made daily by staff. State Fire Marshal report is current (dated 4/5/2023), having no deficiencies noted. DHH inspection is current (dated 3/27/2023), noting one critical item and two non-critical items.

I-C-001 Emergency Plan (MANDATORY) – Compliant – All staff members properly trained on the established emergency plan approved by DPS&C.

I-C-003 Fire Safety/Code Conformance (MANDATORY) – Compliant – Facility compliant with the requirements of the state fire marshal and State Fire Marshal inspection report is current (dated 4/5/2023). All violations, if any, corrected ASAP and submitted as corrective action.

II-A-007 Counts (MANDATORY) - Compliant – Count procedure established and logs accurately maintained by staff

II-A-016 Photo Identification (MANDATORY) – Compliant – All offenders provided a photo identification upon intake at the facility

II-A-018 Offender Drug Testing (MANDATORY) – Compliant – Offenders drug tested monthly in accordance with requirements outlined by DPS&C. Documentation and records maintained.

III-A-001 Rules and Discipline (MANDATORY) – Compliant – Offenders given a DOC rulebook consisting of facility rules and regulations upon intake at orientation

IV-A-003 Food/Dietary Allowances (MANDATORY) – Compliant — Facility menus meet required recommendations and required documentation recorded and maintained. Offenders fed three (3) meals daily, and no specific diets required for offenders at time of inspection.

IV-A-006 Food Service Management (MANDATORY) – Compliant – Written policy and procedure established and documented, maintained on file by the Warden.

IV-B-001 Plumbing Fixtures - Toilets and Washbasins (MANDATORY) – Compliant – Accessible facilities (including hot/cold running water) available to offenders and maintenance records documented and maintained on file. All facilities operational at time of inspection. Handicap accessible facilities available in compliance with ADA.

IV-B-002 Plumbing Fixtures - Showers (MANDATORY) – Compliant – Accessible facilities (including hot/cold running water) available to offenders and maintenance records documented and maintained on file. Showers mostly clean and odor free at time of inspection. Handicap accessible facilities available in compliance with ADA

IV-B-005 Personal Hygiene (MANDATORY) – Compliant – Established policy and procedure for procurement of hygiene items is in practice. Logs maintained documenting items available and provided to offenders.

IV-C-001 Access to Care/Clinical Services (MANDATORY) – Compliant - Offenders receive information on accessing health care services and co-pay information upon orientation. Approval obtained from DPS&C for any major illness or injury.

IV-C-002 Adequate Equipment and Supplies (MANDATORY) – Compliant – First aid supplies obtainable to those in need of immediate minor medical supplies. All required immediate first aid equipment/supplies in good condition/working order.

IV-C-005 24 Hour Care (MANDATORY) – Compliant - An emergency care policy and procedure is established. The local hospital utilized in the event of a major immediate medical need not likely to be resolved at the facility.

IV-C-009 Chronic Care Program (MANDATORY) – Compliant – Facility in compliance with policy/procedure for caring for offenders with chronic conditions. A chronic care case sent to the local hospital, and then transferred out.

IV-C-012 Access to Sick Call (MANDATORY) - Compliant – Facility is in compliance making sick call available to offenders in accordance with DPS&C policy and procedure. Services provided by staff nurse. If illness or injury requires additional medical attention, offender sent to the infirmary or the local hospital.

IV-C-014 Suicide Prevention and Intervention (MANDATORY) – Compliant –Approved written policy and procedure established for suicide prevention/intervention. Implementation training for staff conducted annually in accordance with DPS&C requirements. If an offender placed on suicide watch, offender monitored until transferred out ASAP

IV-C-015 Offender Deaths (MANDATORY) – Compliant – Notifications conducted in accordance with approved written policy and procedure. Reporting and documentation completed and maintained on file in compliance with requirements outlined by DPS&C. No deaths reported since last inspection.

IV-D-007 Internal Review/Quality Assurance (MANDATORY) – Compliant –Management of potential major risk events identified and evaluated on a regular basis to prevent future occurrences and be aware of management of future major risk event. Offenders interviewed at time of inspection stated no issues or complaints to speak of

V-A-005 Exercise and Recreation Access (MANDATORY) – Compliant – Offenders granted access to adequate recreation areas, weather permitting. The facility recreation yard is an outdoor, caged (fenced) area.

VI-B-002 Grievance Process (MANDATORY) – Compliant – Offenders have reasonable access to a grievance remedy procedure. Offenders receive responses in a reasonable recommended amount of time and remedies, when appropriate. No grievances to report since last inspection.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS: Staff is professional and knowledgeable of the facility and its daily operational procedures. Uniforms worn properly. Good rapport among staff members and officers.

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE: Interviewed offenders. Offenders appear to be satisfied with living arrangements and conditions.

RECOMMENDATION:

Post evacuation routes in dorms and resource building.
Place labels in freezer and keep products 6" off the wall surface.
Clean urinals in trustee dorm.
Suggested a check off tag on the outside of First Aid Kit.

Based on the review and inspection of the facility, it is my recommendation the Vermillion Parish Correctional Center continue with annual Basic Jail Guidelines inspections.



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-21-033379-2

No Deficient/Cautionary Codes cited.

Location Information					
Inspection Type	Compliance Building Inspection		Inspection Date	4/5/2023 10:49:17 AM	
Structure ID	281	No. of Buildings	13	Facility Code	J79
Capacity	150	Year Built	1981	Construction Type	Type IIA / (111)
Building/Trade Name			Address		
VERMILLION PARISH LAW ENFORCEMENT			14202 SAVOY ROAD, ABBEVILLE, LA 70510		
Owner Information					
Owner Type	Name	Contact Phone	Contact Email		
Municipal Project	CAPTAIN TROY HEBERT	(337) 898-4424	TROY@VPSO.NET		
Address					
PO BOX 430, ABBEVILLE, LA 70511					
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					
<p>THE PRIOR DEFICIENCIES HAVE BEEN CORRECTED. AN ANNUAL INSPECTION WAS PERFORMED DURING THIS FOLLOW UP INSPECTION. NO APPARENT DEFICIENCIES NOTED AT THE TIME OF INSPECTION. IN COMPLIANCE. LAST FIRE DRILL 4/2/23 HEAD COUNT 104</p>					
Inspector Information					
Name: Kristopher Gumpert	Badge Number:	Inspector Signature:			
Person to whom requirements were explained					
Name: keith	Title: maintenance	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.



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-21-033379-2

No Deficient/Cautious Codes cited.

L.R.S. 40:1577 APPEAL FROM ORDER



Daniel H. Wallis
FIRE MARSHAL

When an order is made by one of the deputies or representatives of the Fire Marshal, the owner or occupant of the building or premises may, within three days, appeal to the Fire Marshal. The Fire Marshal shall, within five days, review the order and advise the owner or occupant of his decision thereon. The owner or occupant may, within five days after the making of affirming of any such order of the Fire Marshal, file an application with the Board of Review.

RULES FOR APPEALING TO THE FIRE MARSHAL BOARD OF REVIEW

- I. Any application to the Board of Review shall contain the following basic information set off in organized fashion with captions indicating that the paragraph in question contains the following basic information.
 1. The name of the applicant.
 2. A brief description of the facts.
 3. A copy of the order of the Fire Marshal which is being appealed.
 4. A reference to the section of the law or code being reviewed.
 5. A brief description of why the applicant feels the requirements of the Fire Marshal is not within the Fire Marshal's authority, or brief description of why the interpretation of the Fire Marshal is incorrect or what specific relief is required by the applicant.
 6. A list of the individuals who will be appearing before the Board, and a brief description of the testimony or information they will be providing the Board.
 7. A list of all the documents which will be introduced or provided to the Board along with a brief description of the documents, and if possible, a copy of said documents.
 8. A list of each exhibit except for documents, and a brief description of the exhibit.
- II. Whenever possible, a notice of the meeting, date and place, and the agenda will be recorded in the Louisiana Register, however, whenever that is not possible, a copy of the meeting notice including the date, time and place, and agenda of the meeting of the Board will be published in the official notices of the official state journal; furthermore, a press release containing the same information will be mailed to the official journals of the cities of Shreveport, Monroe, Lafayette, Lake Charles, Alexandria, New Orleans, and Baton Rouge and any city or town in which the meeting of the Board is to be held if it is not one of the aforementioned major cities; and the same information shall be mailed to each individual who has notified the Fire Marshal of his desire to receive a notice of such appeal.
- III. A copy of the determination of the Board as prepared by the Chairman will be mailed to each individual who requests a copy of that specific determination as well as to the applicant.
- IV. The time delays for filing an appeal shall be those specified in R.S.40:1577 and 40:1578 1 D.



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Detention or Incarceration
Notice of Violations

Routine/Renewal

Permit Number 57-04-224	Permit Name Vermilion Parish Law Enforcement Center-224	
Name of Establishment Vermilion Parish Law Enforcement Center-224	Owner Name VERMILION PARISH LAW ENFORCE CEN	
Address 14202 Savoy RD Abbeville, LA 70510	Date 03/27/2023	Time 10:35 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	3 - The walls are in disrepair. RUST, PAINT PEELING [Repeat]
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair. MINOR REPAIRS [Repeat]

Comments:

SHOWER IN A1 - TIMER NEEDS TO BE ADJUSTED

Number Licensed For
160

Number in Attendance
110

License Anniversary
03/31/2023

Sanitarian Name/Print
Kelly Smith

Phone #
337-893-1438

Sanitarian Signature

R.S. #
1439

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 _____

Signature of Recipient

Name/Title
KEITH CAMPBELL, MAINTENANCE



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

**Retail Food
Notice of Violations**

Routine/Renewal

Permit Number 57-0001297-1	Permit Name VERMILION PARISH LAW ENFORCE CEN KITCHEN	
Name of Establishment VERMILION PARISH LAW ENFORCE CEN	Owner Name VERMILION PARISH LAW ENFORCE CEN	
Address 14202 SAVOY RD ABBEVILLE, LA 70510	Date 03/27/2023	Time 10:05 AM

LAC TITLE 51 PART XXIII

CRITICAL ITEMS: These items MUST BE CORRECTED IMMEDIATELY (see compliance schedule below). Repeat violations may lead to enforcement actions or permit suspensions.		
Category	Code Reference	Description of Violations
WATER/SEWAGE	3105	40 - 3105 - A backflow prevention device is not installed on a threaded faucet where a hose is attached. HOSE NEAR 3 COMPARTMENT SINK [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	Code Reference	Description of Violations
FOOD PROTECTION	1501	54 - 1501.4 - Food is not stored six (6) inches off the floor. IN PAPER GOODS STORAGE [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2101	67 - 2101.1 - Non-food contact equipment is not maintained in good repair. RUST [Repeat]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2501	75 - 2501.1 - Food-contact surfaces of cooking equipment and pans are not free of encrusted grease and other accumulations. INTERIOR OF ICE MACHINE [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2517	83 - 2517.5 - Clean equipment/utensils are not stored covered or inverted. [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2519	84 - 2519.1 - In use food utensils are not stored with the handles above the top of the food. [COS]
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3701	105 - 3701.6 - Floor is not maintained in good repair. PAINT PEELING [Repeat]
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.4 - Walls/ceilings or attached equipment are not in good repair. MINOR REPAIRS, RUST ETC [Repeat]

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

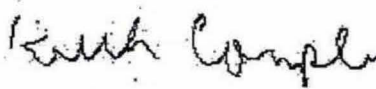
payable within 30 days' notice, and failure to pay shall result in revocation of the permit.

Sanitarian Name/Print	Phone #	Sanitarian Signature	R.S. #
Kelly Smith	337-893-1438		1439

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
KEITH CAMPBELL, MAINTENANCE

Signature of Recipient





STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Detention or Incarceration
Notice of Violations

Routine/Renewal

Permit Number 57-04-224	Permit Name Vermilion Parish Law Enforcement Center-224	
Name of Establishment Vermilion Parish Law Enforcement Center-224	Owner Name VERMILION PARISH LAW ENFORCE CEN	
Address 14202 Savoy RD Abbeville, LA 70510	Date 09/25/2023	Time 10:00 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
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair. SOME METERED FAUCETS DO NOT PROVIDE A CONTINUOUS FLOW OF WATER FOR AT LEAST 15 SECONDS (VARIOUS LOCATIONS). HOT WATER FAUCET AT THE 1ST HAND SINK IN MEN'S FRONT HALL RESTROOM IS TIGHT. COLD WATER VALVE IS TURNED OFF AT A HAND SINK IN THE DORM. [Repeat]

Comments:

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY CAPTAIN TROY HEBERT.
COPY OF REPORT EMAILED TO jrtboudreaux@yahoo.com and jbroussard@vpso.net

Number Licensed For 160	Number in Attendance 127	License Anniversary 03/31/2024	
Sanitarian Name/Print Kelly Smith	Phone # 337-893-1438	Sanitarian Signature 	R.S. # 1439
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 TROY HEBERT, CAPTAIN	Signature of Recipient 		