BASIC JAIL GUIDELINES
DOC Offenders Housed in Local Jail Facilities

JULY 31, 2022

John Bel Edwards
Governor

James M. Le Blanc
Secretary
Foreword

In 1996, the United States District Court for the Middle District of Louisiana recognized the hard work of the thousands of people involved in Louisiana’s correctional system through its approval of a Settlement Agreement. That Settlement Agreement ended over 20 years of Court supervision and consent decrees in almost all of Louisiana’s jails and prisons. In that Agreement, the Department of Public Safety & Corrections (DPS&C) declared that the Sheriffs of the State of Louisiana are part of the solution to resolving the capacity problem of housing DPS&C prisoners.

As part of the Settlement, the State, under the signature of Governor Murphy J. “Mike” Foster, established a formal partnership with Louisiana Sheriffs for the housing of DPS&C offenders. The partners, the DPS&C and Louisiana Sheriffs’ Association (LSA), established Basic Jail Guidelines (BJG), which became effective on April 1, 1997. The BJG were designed to assure that the fundamental constitutional rights of DPS&C offenders housed in local jails would not be jeopardized by such housing arrangements.

In July 2009, Governor Bobby Jindal, the DPS&C, and the LSA revised the partnership agreement, acknowledging that to effectively prepare offenders to transition from jail to the community is in the best interest of the citizens of Louisiana. DPS&C and LSA agreed to develop reentry strategies that address public safety risks and benefit offenders and their families, victims, and the entire community.

In September 2011, in furtherance of the commitment to reentry, the DPS&C and LSA Jail and Prisons Committee issued new and revised Basic Jail Guidelines that became effective December 1, 2011. These Basic Jail Guidelines have been revised and become effective July 17, 2022

We thank the numerous individuals from within our organizations who have provided invaluable commentary and recommendations for the 17 July 2022 edition of the Basic Jail Guidelines.

James M. Le Blanc, Secretary
LA Department of Public Safety & Corrections

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VISION, MISSION, AND GOALS STATEMENT

VISION:
The Louisiana Department of Public Safety & Corrections creates a safer Louisiana by providing correctional programs committed to the protection of the public; safety of our staff; security of our incarcerated population; services to those victimized by crime; and opportunities for positive behavioral change in those remanded to our custody and/or supervision.

MISSION:
We achieve our vision through safe, secure prison operations and community correctional programs, development and implementation of effective criminal justice policies for Louisiana, and the provision of rehabilitative opportunities for our population that supports their successful transition into the community.

GOALS:

Staff and Offender Safety
We provide for the safety of staff and offenders by maintaining an organized and disciplined system of operations. All employees are provided training on the principles of the Code of Ethics of the American Correctional Association to demonstrate our commitment to professional and compassionate service. Our employees conduct their duties and responsibilities with a high degree of integrity and a respect for the value and dignity of human life.

Provision of Essential Services
We provide services relating to food, clothing, and shelter. We are further committed to delivering quality and cost effective health care services that maintain medical and behavioral health services during the offender’s incarceration and to prepare him/her for release by providing linkage to care in the community.

Opportunity for Change
We promote moral rehabilitation through program participation and provide an environment for offenders that encourage positive behavior change. On behalf of individuals demonstrating motivation for change and a desire to participate in programming, the Department seeks educational, rehabilitative, and productive work opportunities, either within the institution or in the community for individuals under supervision.

Opportunity for Making Amends
Through the opportunities to work and volunteer in prison jobs and educational programs, make restitution, participate in community restorative initiatives, and communicate in victim-initiated victim offender dialogue, offenders are able to repair and/or learn from the harm caused by their crime. We believe that victims of crime have the right to an active role in shaping how to meet their needs.

Reentry
We recognize the role of community participation and support in the successful delivery of our vision and mission. By using evidence-based practices and following criminal justice reform legislation, we will increase compliance with conditions of parole supervision and the ability of the offenders to reintegrate with the end goal of safely reducing recidivism within Louisiana. We are committed to working with the public to reduce barriers and stigma faced by returning offenders that hinder their successful reintegration upon their return to our communities.
INTRODUCTION

All local jail facilities that house state offenders on a continuing basis shall comply with the BJG established in collaboration between the Department of Public Safety and Corrections and the Louisiana Sheriffs’ Association. The BJG represents a consensus of professional opinion and management experience and is considered the minimum conditions necessary to ensure the safe, efficient, effective and legal operation of a jail facility. The BJG shall serve as the basis for evaluating Louisiana jails to ensure adherence to these operational guidelines. Nothing contained in the BJG shall be construed to prohibit a local jail facility from adopting standards and requirements governing its own employees and facilities, provided that such rules meet or exceed and do not conflict with the BJG.

Facilities that do not agree to the BJG, or who fail to maintain certification of BJG compliance by the DPS&C, shall not be allowed to house state offenders for periods extending 30 days after the offender’s sentencing date.

An on-site operational compliance review of each DPS&C facility, contract and cooperative endeavor agreement transitional work program or transitional work program operated in a local jail facility shall be conducted to provide the Warden, Sheriff or Administrator with an objective, informative assessment of operational activities. Compliance monitoring shall be performed on a frequency as determined by the Chief of Operations, but at least annually for DPS&C facilities, contract and cooperative endeavor agreement transitional work programs and transitional work programs operated in local jail facilities.

Regional BJG Team Leaders are responsible for preparing written Compliance Monitoring Reports within 30 working days after completion of the monitoring review. The written Compliance Monitoring Report shall be submitted to the Chief of Operations for review and a copy distributed to the Secretary, Assistant Secretary, appropriate Regional Warden, Warden, Internal Auditor and when applicable, to the Sheriff or Administrator of a transitional work program. However, when there is determined to be significant levels of non-compliance during the monitoring visit, the Secretary, Chief of Operations, Internal Auditor, appropriate Regional Warden and the Sheriff or Administrator shall be notified of such findings at the conclusion of the monitoring visit.

The Warden, Sheriff or Administrator shall respond to all non-compliance or partial compliance levels reported no later than 15 working days after receipt of the Compliance Monitoring Report. The response shall be submitted to the Chief of Operations who shall forward a copy to the Secretary, Assistant Secretary, appropriate Regional Warden and Internal Auditor.

Total Number of Guidelines: 118

Mandatory Guidelines: 27
Non-Mandatory: 91
PART I.  SAFETY

A. PROTECTION FROM INJURY AND ILLNESS

I-A-001    Safety and Sanitation Inspections (MANDATORY – ANNUAL REVIEW)  
(Ref. ACA CJS 1-1A-01, 1-4A-03, 1-4A-04)  

The facility complies with all applicable laws and regulations of the State Sanitation Officer and the State Fire Marshal. The following inspections are implemented:

- Weekly sanitation inspections of all facility areas by a qualified departmental staff member.
- There are weekly inspections of all food service areas, including dining and food preparation areas and equipment.
- Water temperature in housing areas is checked and recorded daily.
- Comprehensive and thorough monthly inspections by a safety/sanitation specialist for compliance with sanitation, safety and fire prevention standards.
- At least annual inspections by the state sanitation officer and the state fire marshal.

Comment: The facility should have at least one trained fire/safety/sanitation officer. Qualified refers to a person whose training, education, and/or experience qualifies him or her to do the job indicated in the guideline.


Documentation: Completed inspection checklists and reports. Documentation of corrective action. Inspection reports.

I-A-002    Disposal of Materials  
(Ref. ACA CJS 1-1A-02)  

Disposal of liquid, solid, and hazardous material complies with applicable government regulations.

Comment: None

Protocol: Written policy and procedure. Internal health/sanitation inspection checklists that include solid waste issues.

Documentation: Trash disposal contract. Completed inspection reports, including
documentation that deficiencies were corrected.

I-A-003 Vermin and Pests
(Ref. 7/1/2009 BJG IV-009, ACA CJS 1-1A-03)

Vermin and pests are controlled. There is a written and implemented plan for the control of vermin and pests.

Comment: None
Documentation: Pest control contracts, trash disposal contracts, and inspection reports.

I-A-004 Housekeeping
(Ref. 7/1/2009 BJG IV-008, ACA CJS 1-1A-04)

The facility is clean and in good repair. There is a written housekeeping plan that provides for the ongoing cleanliness and sanitation of the facility.

Comment: None
Documentation: Inspections reports, completed forms, documentation of correction of identified deficiencies.

I-A-005 Water Supply
(Ref. 7/1/2009 BJG II-003, ACA CJS 1-1A-05)

The facility’s potable water source and supply is certified at least annually by an independent, outside source to be in compliance with the state sanitary code. The facility complies with the requirements of the state health officer. There is a specific plan for addressing deficiencies, if any, that is approved by the state health officer.

Comment: None
Protocol: Written policy and procedure.
Documentation: Documentation of approval by Health Department or local authority. Plan for addressing deficiencies.

B. VEHICLE SAFETY

I-B-001 Offender Transportation (REVISED)
(Ref. 7/1/2009 BJG IV-025; Department Regulation OP-A-3)

Escorted and unescorted absences of DPS&C offenders are governed by La.
R.S. 15:811 and 15:833 and Department Regulation No. OP-A-3 "Escorted Absences."

All funeral trips for DOC offenders shall be conducted via video visitation. Any exceptions require prior approval from the Chief of Operations.

Comment: None  
Protocol: Written policy and procedure.  
 Documentation: Documentation of staff training. Documentation of medical, funeral, etc. (outside trips).

C. EMERGENCY PREPAREDNESS/RESPONSE

I-C-001 Emergency Plan (MANDATORY – ANNUAL REVIEW)  
(Ref. 7/1/2009 BJG II-002, III-007, ACA CJS 1-1C-01, 1-1C-02, Department Regulations PS-D-3, OP-A-5, OP-B-3, and AM-I-4)

There is a written plan, submitted to the Secretary of DPS&C that specify the procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of hostages, and natural or man-made disasters. These plans are made available to all applicable personnel and are reviewed annually and updated, as needed. All facility personnel are trained annually in the implementation of the emergency plan.

An evacuation plan is used in the event of fire or major emergency. The plan is approved by the state fire marshal, reviewed annually, and updated, if necessary.

There are written procedures for significant unusual occurrences or facility emergencies including but not limited to natural or man-made disasters; major disturbances such as riots, hostage situations, escapes, fires, deaths, serious illness or injury and assaults or other acts of violence. Such procedures include the reporting of these incidents to the DPS&C, Office of Adult Services, telephone number 800-803-8748 during normal business hours or the control center at Elayn Hunt Correctional Center, telephone number 800-842-4399 after hours, when they involve DPS&C offenders. In addition, the facility shall follow the incident reporting procedures as outlined in Department Regulation C-05-001/AM-I-4, “Activity Reports, Unusual Occurrence Reports”, Category A, B and C.

Comment: Emergency plans must not only address emergency situations/disturbances within the facility, but must also address natural disasters (flood, hurricane, tornado, etc.) or human-induced disasters (hazardous material spills, infrastructure failure, bio-terrorism, etc.). These emergency plans must be submitted to the Secretary of the DPS&C.


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**I-C-002 Immediate Release of Offenders**  
(Ref. 7/1/2009 BJG II-002, ACA CJS 1-1C-03)

There is a means for the immediate release of offenders from locked areas in case of an emergency and there are provisions for a backup system. The facility has exits that are properly positioned, are clear from obstruction, and are distinctly and permanently marked to ensure the timely evacuation of offenders and staff in the event of a fire or other emergency.

**Comment**: The responsibility of the personnel in emergency situations should be clearly defined. Staff should be aware of the location and identification of keys and be knowledgeable about evacuation routes. For facilities with no mechanical/electronic locking mechanism system where the use of keys is the primary system for immediate release in emergency situations, a backup system for the use of keys should be clearly defined.


**Documentation**: Facility records/logs.

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**I-C-003 Fire Safety/Code Conformance (MANDATORY – ANNUAL REVIEW)**  
(Ref. 7/1/2009 BJG II-001, ACA CJS 1-1C-04)

The facility complies with the requirements of the state fire marshal. There is a specific plan for addressing deficiencies, if any, that is approved by the state fire marshal. The state fire marshal approves any variances, exceptions, or equivalencies.

**Comment**: None

**Protocol**: Written policy and procedure. Internal inspection forms. Detention and alarm system testing schedule.

**Documentation**: Reports/inspections from external agencies. Internal inspection reports. Documentation of fire alarm and detection system maintenance and testing. Plans for addressing deficiencies.

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**I-C-004 Facility Furnishings**  
(Ref. ACA CJS 1-1C-06)

Facility furnishings meet fire-safety-performance requirements.

**Comment**: Facility furnishings include draperies, curtains, furniture, mattresses, bedding, wastebaskets, decorations, and any similar material that can burn. Such materials should be
subjected to careful fire-safety evaluation prior to purchase or use. “Furnishings” applies to all living quarters.

Protocol: Written policy and procedure.
Documentation: Specifications for all furnishings.

I-C-005 Flammable, Caustic, and Toxic Materials
(Ref. 7/1/2009 BJG III-006, ACA CJS 1-1C-07, Department Regulation OP-B-3)

Written policy, procedure, and practice govern the control and use of all flammable, toxic, and caustic materials.

Comment: None
Internal inspection forms.
Documentation: Staff training records. Offender training records. Internal inspection reports.
Documentation of incidents that involved FTC materials. Inventories.

I-C-006 Operational Capacity
(Ref. 7/1/2009 BJG II-004)

The number of offenders present, does not exceed the operational capacity as determined by the state fire marshal and state health officer.

The state fire marshal will determine a capacity primarily based upon exiting capabilities. The state health officer will determine a capacity based upon the ratio of plumbing fixtures to offenders and square footage. The operational capacity will be the lower of these two figures.

Comment: None
Protocol: Written policy and procedure. State Fire Marshal and State Health Officer Inspection Reports.
Documentation: Facility count sheet.

PART II. SECURITY

A. PROTECTION FROM HARM

II-A-001 Control
(Ref. 7/1/2009 BJG III-013, ACA CJS 1-2A-01)

There is 24-hour monitoring and coordinating of the facility’s security, life safety, and communications systems.
II-A-002  Secure Perimeter  
(Ref. 7/1/2009 BJG II-009, ACA CJS 1-2A-04)

The facility's perimeter is controlled by appropriate means to ensure that offenders are secured, remain within the perimeter and that access by the general public is denied without proper authorization.

II-A-003  Sufficient Staff  
(Ref. 7/1/2009 BJG I-002 and I-008, ACA CJS 1-2A-05, 1-2A-09)

There is a written document describing the facility's organization and staffing plan. This should include an organizational chart that groups similar functions, services, and activities. Each facility meets minimum security staffing requirements which reflect good correctional practice. Sufficient staff, including a designated supervisor, are provided at all times to perform functions relating to the security, custody, and supervision of offenders and, as needed, to operate the facility in conformance with the Basic Jail Guidelines.

II-A-004  Female Offenders and Female Staff  
(Ref. ACA CJS 1-2A-05)

When a female offender is housed in a facility, at least one female staff member is on duty at all times.

II-A-005  No Offender Control Over Others
(Ref. 7/1/2009 BJG III-012, ACA CJS 1-2A-06)

No offender or group of offenders is given control, or allowed to exert authority over other offenders.

Comment: None
Protocol: Written policy and procedure.

II-A-006 Staff Log (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG I-011, ACA CJS 1-2A-08)

Correctional staff maintain a permanent log and prepare shift reports that record routine information, emergency situations, and unusual incidents. The facility shall maintain written records or logs which continuously document the following information:

1. Personnel on duty;
2. Offender population;
3. Admission and release of offenders;
4. Shift activities;
5. Entry/exit of all visitors including legal/medical;
6. Unusual occurrences or facility emergencies (including but not limited to major and minor disturbances such as riots, hostage situations, fires, escapes, deaths, serious illness or injury and assaults or other acts of violence). Refer to BJG I-C-001 for reporting requirements to DPS&C.

Comment: Permanent logs may be recorded electronically.

II-A-007 Counts (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG III-002, ACA CJS 1-2A-11)

The facility has a system for physically counting offenders. At least one formal count is conducted for each shift, with no less than three counts daily. The system includes strict accountability for offenders assigned to work and other approved temporary absences.

Comment: Electronic means should not be substituted for direct staff observation.
Documentation: Completed forms. Facility records/logs.
Offender Population Management System
(Ref. 7/1/2009 BJG I-010, ACA CJS 1-2A-10, 1-7D-04, Department Regulation AM-D-3)

There is an offender population management process that includes records on the admission, processing, and release of offenders. Written policy, procedure, and practice provide for offender case record management that includes at a minimum, maintenance of the following documents and information. This offender record and any re-entry transition document envelopes shall be transferred with the offender at such time the offender is transferred to another local or DPS&C facility.

1. Master prison form;
2. Bill of Information and Court Minutes OR Uniform Commitment Order;
3. One photograph;
4. Reports of disciplinary actions, grievances, incidents or crimes committed while in custody;
5. Records of program participation, work assignments, and classification actions;
6. Any government issued identification (i.e., driver’s license, social security card or birth certificate/birth card or any other valid identification);
7. Offender health record (see BJG IV-D-004).
8. Cash receipts and property receipts

In addition to the maintenance of the above information, the following shall be collected after sentencing and forwarded to the appropriate DPS&C Pre-Class Coordinator, along with any additional sentencing information, within three working days either by fax to 225-342-3759 or email to DOC-HQ_supplemental@ia.gov.

1. Master prison form;
2. DPS&C Credit for DOC Commitment (Jail Credit letter);
3. AFIS suspect Rap Sheet with Photo (to include offender’s SID # and ATN # for the disposition of the Hard Labor disposition);
4. Bill of Information and Court Minutes or Uniform Commitment Order (UCO) for each conviction (for probation violators both the original sentencing minutes and the revocation UCO or minutes are required); and
5. DPS&C Acknowledgements and Signature Statement form.
Comment: See V-C-002 for contents of the re-entry transition document envelopes.
Documentation: Completed forms. Reports. Offender Record.

II-A-009 Intake – Legal Commitment and Medical Service (REVISED)
(Ref. 7/1/2009 BJG III-002-2, ACA CJS 1-2A-13 and 1-4C-09; Department Regulations HCP28 and IS-B-1)

Prior to accepting custody of an offender, staff determine that the offender is legally committed to the facility, and that the offender is not in need of immediate medical attention and/or mental health services.

Comment: None
Documentation: Completed admission forms. Facility logs.

II-A-010 Admissions (REVISED)
(Ref. ACA CJS 1-2A-14 and 1-4C-09, BJG IV-C-001, IV-C-006; Department Regulations HCP28 and IS-B-1)

Admission processes for a newly admitted offender include, but are not limited to:

- Searching of the offender and personal property;
- Inventoring and providing secure storage of personal property;
- Providing an itemized receipt for personal property;
- Recording of basic personal data;
- Performing a criminal history check;
- Photographing and fingerprinting;
- Separating from the general public;
- Providing a health screening to assess and identify any health and safety needs in accordance with BJG IV-C-006; and
- Providing information about access to health services, copay requirements and submitting grievances.

Comment: See also IV-C-006 for guidelines on health screens at admission.
Protocol: Written policy and procedure.
Documentation: Intake and admission forms. Screening forms. Inventory form. Receipt form.
II-A-011  Out of State Offenders  
(Ref. 7/1/2009 BJG III-002-4, LA R.S. 15:709; Department Regulation IS-B-4)

The names of any out of state offender (federal or state) to be housed at a local jail or privately managed facility shall be submitted to the Chief of Operations prior to the offender(s) entering the State of Louisiana. No such offender shall be housed if the offender would be classified as maximum custody under the Louisiana DPS&C classification procedures.

Any offender convicted and sentenced to incarceration by a court in another state (federal or state) shall not be released in the State of Louisiana. Any out of state offender (federal or state) housed in a local jail or privately managed facility shall be returned to an appropriate correctional facility located within the state where the offender was convicted and sentenced for release in that state, prior to the offender's release date.

Comment: None
Protocol: Written policy and procedure.

II-A-012  Classification System (REVISED)  
(Ref. 7/1/2009 BJG IV-001, ACA CJS 1-2A-16, 1-2A-17, Department Regulation IS-B-1)

Written policy, procedure, and practice provide for a written offender classification plan that includes custody required and assignment to appropriate housing. Offender management and housing assignment considers age, gender, legal status, custody needs, behavioral issues, and other unique needs or issues as they arise. All offenders are classified using an objective classification process that at a minimum:

- Identifies the appropriate level of custody for each offender;
- Identifies appropriate housing assignment;
- Identifies the offender’s interest and eligibility to participate in available programs.

Comment: None
II-A-013  Prohibition on Youthful Offenders  
(Ref. 7/1/2009 BJG IV-002, ACA CJS 1-2A-19, 1-2A-20)

Offenders subject to juvenile jurisdiction are housed in adult facilities only under the conditions established by law. If juveniles are committed to the facility, a plan is in place to provide for the following:

- Supervision and programming needs of the juveniles to ensure their safety, security, and education;
- Classification and housing plans;
- Appropriately trained staff.

Office of Adult Services shall be notified of offenders who are under the age of 18 that are sentenced to the DPS&C as an adult for transfer to the appropriate institution.

Comment: None.

II-A-014  Separation in Classification  
(Ref. 7/1/2009 BJG III-001, ACA CJS 1-2A-17)

Male and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation.

Comment: None
Documentation: Offender housing records, offender classification records. Diagram of facility showing male/female housing areas.

II-A-015  Deleted (Prior to 2011)

II-A-016  Photo Identification  
(Ref. 7/1/2009 BJG III-002-1)

The facility shall provide each DPS&C offender with photo identification, which the offender shall carry/wear on their person at all times.

Comment: None
Protocol: Written policy and procedure.
Documentation: Offender identification card/wristband.

II-A-017 Drug Free Workplace
(Ref. 7/1/2009 BJG I-002-1, Department Regulation AM-F-47)

Written policy, procedure, and practice provide for a drug-free workplace, which includes at a minimum pre-employment testing, post-accident testing, reasonable suspicion/probable cause testing and quarterly random testing of all employees.

Comment: None
Protocol: Written policy and procedure.
Documentation: Drug testing lab fee bills for drug testing of facility employees (including pre-employment, post-accident, reasonable suspicion/probable cause, and random testing).

II-A-018 Offender Drug Testing (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG III-017, Department Regulation OP-C-3)

Written policy, procedure, and practice provide for alcohol/drug testing, both randomly and for probable cause. Facility policy will require that a minimum of 5% of the DPS&C offender population shall be drug tested on a monthly basis.

Comment: None
Protocol: Written policy and procedure.

II-A-019 Offender Transfers (REVISED)
(Ref. Department Regulation IS-B-1)

All transfers of DPS&C offenders to other than DPS&C facilities shall be submitted and approved by the Office of Adult Services (OAS) at least one day prior to all scheduled transfers and within one business day for all non-scheduled transfers. The DOC Offender Transfer Form shall be submitted by the transferring facility to OAS at least one day prior to the transfer occurring by fax to 225-342-2439 or by email to LocalJailTransfers@la.gov.

Offenders shall not be transferred to facilities other than DPS&C facilities within 60 days of release, unless for disciplinary reasons.

An offender scheduled for an appearance before the Committee on Parole shall not be transferred prior to the scheduled hearing date. However, if the transfer is deemed unavoidable by the Warden due to security concerns, the Warden shall obtain prior approval for an exception from the DPS&C Chief of Operations.
or designee. Staff from the sending facility shall notify the Committee on Parole as soon as it is known that the offender must be transferred.

**Comment:** None

**Protocol:** Written policy and procedure.

**Documentation:** Facility logs. Documentation of transfers of DPS&C offenders to other than DPS&C facilities.

II-A-020  **Cell Checks (NEW) (Mandatory – Annual Review)**
(Ref. 07/01/2009 BJG IV-023; Department Regulation HCP30)

Written policy, procedure, and practice provide secure, safe housing by establishing the frequency of cell checks in all cellblock areas not to exceed four (4) hours. Staff shall document cell checks in their staff logs.

**Comment:** None.

**Protocol:** Written policy and procedure.

**Documentation:** Facility records and logs.

**B. Use of Physical Force**

II-B-001  **Use of Force**
(Ref. 7/1/2009 BJG III-005, ACA CJS 1-2B-01, Department Regulation OP-A-16)

The use of force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. Written policy, procedure, and practice govern the use of force and provide that force shall never be used as punishment.

**Comment:** None

**Protocol:** Written policy and procedure. Staff training curriculum.

**Documentation:** Facility records and logs. Incident reports. Training records.

II-B-002  **Use of Restraints**
(Ref. 7/1/2009 BJG III-003, ACA CJS 1-4D-12, 1-2B-02, Department Regulation OP-A-16, OP-A-3, and HCP40)

Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg irons, are never applied as punishment. There are defined
circumstances under which supervisory approval is needed prior to application. Restraints on offenders for medical and psychiatric purposes are only applied in accordance with policies and procedures approved by the health authority, including:

- Conditions under which restraints may be applied;
- Types of restraints to be applied;
- Identification of a qualified medical or behavioral health professional who may authorize the use of restraints after reaching the conclusion that less intrusive measures are not a viable alternative;
- Monitoring procedures;
- Length of time restraints are to be applied;
- Documentation of efforts for less restrictive treatment alternatives;
- An after incident review.

Comment: Restraint devices should be used only to prevent self-injury, injury to others, or property damage. Restraints are not applied for more time than is necessary. Qualified medical professional refers to a person who has the education, credentials and experience and is permitted by law, within the scope of his or her professional practice act, to evaluate and care for patients. Qualified behavioral health professional refers to credentials above, except that they evaluate and care for behavioral health needs of patients.

Protocol: Written policy and procedure.

Documentation: Facility records and logs.

II-B-002-1 Use of Restraints for Pregnant Offenders (REVISED)
(Ref. 7/1/2009 BJG III-003, 12/1/2011 BJG II-B-002, ACA CJS 1-2B-03-1, Department Regulation HCP33, La. R.S. 15:744.1 – 15:744.8)

Written policy, procedure, and practice complies with the following requirements:

Restraints During Pregnancy

The Warden or designee shall ensure the following protocols regarding the use of restraints on pregnant offenders are adhered to:

1. Restraints During the Second and Third Trimester
   a. The type of restraint applied and the application of the restraint shall be done in the least restrictive manner necessary;
   b. An electronic restraint belt shall never be used;
   c. The offender shall never be handcuffed behind the back;
   d. The offender shall never be restrained using leg irons; and
   e. The offender shall never be placed in a face down position.

2. Restraints During Active Labor and Delivery
a. Restraints shall not be utilized on a pregnant offender during active labor and delivery unless a health care practitioner orders restraints for an offender who, due to a psychiatric or medical disorder, is a danger to herself, her child, her unborn child, or other persons.
b. If restraints are utilized during active labor and delivery, the type of restraint applied and the application of the restraint shall be done in the least restrictive manner necessary.
c. The Unit Medical Director shall provide guidance on the use of restraints on pregnant offenders prior to active labor and delivery.

3. Restraints During Pregnancy-Related Medical Distress, Transportation, and the Period Following Delivery
a. Restraints shall not be used on a pregnant offender
   1) During any pregnancy-related medical distress,
   2) While she is being transported to a medical facility or LCIW for delivery or any pregnancy-related medical distress, or
   3) During the period following delivery before the offender has been discharged from the medical delivery, unless there are compelling grounds to believe that the offender presents either of the following:
      i. An immediate and serious threat of physical harm to herself, staff, or others; or
      ii. A substantial flight risk and the offender cannot be reasonably contained by other means.
b. If restraints are utilized during transportation or the period following delivery, the offender shall not be restrained using waist restraints under any circumstances.

4. Removal of Restraints: If a health care professional treating the pregnant offender requests, based on his or her professional medical judgment, that restraints not be used, the correctional personnel accompanying the pregnant offender shall immediately remove all restraints.

5. Documentation of Restraints on Pregnant Offenders
a. Should restraints be used on a pregnant offender, within ten days of the use of restraints a written record shall be made to include the following:
   1) The type of restraint used;
   2) The circumstances that necessitated the use of restraints; and
   3) The length of time the restraints were used.
b. This written record shall be retained in the offender’s master record for a minimum of five years, but shall not constitute a medical record.
c. This written record shall be made available as a public records request with the offender’s identifying information redacted, unless the offender gives prior written consent for the public release of the record.

Comment: None.
Protocol: Written policy and procedure.
Documentation: Facility records and logs.
II-B-003  Use of Firearms  
(Ref. ACA CJS 1-2B-06, Department Regulations OP-A-19 and OP-A-16)  

The use of firearms complies with the following requirements:

- Weapons are subject to stringent safety regulations and inspections;
- A secure weapons locker is located outside the secure perimeter of the facility;
- Except in emergency situations, firearms and authorized weapons are permitted only in designated areas to which offenders have no access;
- Employees supervising offenders outside the facility perimeter follow procedures for the security of weapons;
- Employees are instructed to use deadly force only after other actions have been tried and found ineffective, unless the employee believes that a person's life is immediately threatened;
- Employees on duty use only firearms or other security equipment that have been approved by the facility administrator; and
- Appropriate equipment is provided to facilitate safe unloading and loading of firearms.

Comment: None  
Protocol: Written policy and procedure. Staff training curriculum.  
Documentation: Training records. Safety regulation and inspection reports. Photos of equipment used for unloading and reloading.

II-B-004  Written Reports  
(Ref. ACA CJS 1-2B-05)  

Written reports are submitted to the facility administrator or designee no later than the conclusion of the tour of duty when any of the following occur:

- Discharge of a firearm or other weapon;
- Use of less lethal devices to control offenders;
- Use of force to control offenders;
- Offender(s) remaining in restraints at the end of the shift; and/or
- Emergency distribution of security equipment.

Comment: None  
Protocol: Written policy and procedure.  
Documentation: Completed reports. Facility records and logs.

C. CONTRABAND/SEARCHES

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II-C-001 Procedures for Searches
(Ref. ACA CJS 1-2C-01, 1-2C-04, Departmental Regulation OP-A-8)

Written policy, procedure and practice guide searches of facilities and offenders to control contraband. Manual or instrument inspection of body cavities is conducted only when there is reasonable belief that the offender is concealing contraband and when authorized by the facility administrator or designee. Health care personnel will conduct manual or instrument inspections in private.

Comment: None
Process Indicators: Observation. Facility records and logs. Offender and staff interviews.

D. ACCESS TO KEYS, TOOLS, UTENSILS

II-D-001 Key, Tool, and Utensil Control (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG III-004, III-004-1, ACA CJS 1-2D-01)

Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles, and other sharps) are inventoried and use is controlled to ensure public safety and facility security. Written policy, procedure, and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies.

Such policies and procedures in each local facility providing vocational programming and equipment funded and purchased by DPS&C shall abide by the terms of a Memorandum of Understanding (MOU) established with the DPS&C Reentry Division.

Comment: None
Protocol: Written policy and procedure. Inventory forms.

PART III. ORDER

A. OFFENDER DISCIPLINE

III-A-001 Rules and Discipline (REVISED) (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG III-008, ACA CJS 1-2A-15, 1-3A-01, 1-6C-01, 1-6C-02, 1-6C-03, 1-6C-04, Department Regulation OP-C-1)

Prior to being placed in the general population, each offender is provided with an orientation that includes facility rules and regulations, including access to medical care and the process for applying for restoration of good time. The
facility shall follow and provide the DPS&C "Disciplinary Rules and Procedures for Adult Offenders," Attachment to DR No. OP-C-1, to the offender population.

The DOC offender must sign and date a statement acknowledging receipt of this information.

- If the Sheriff or local jail administrator believes that a loss of good time is appropriate, then the incident shall be fully documented and the offender transferred to the DPS&C for a disciplinary hearing to ensure due process in accordance with La. R.S. 15:571.4.

Comment: Penalties should be proportionate to the importance of the rule and the severity of the violation.

PART IV. CARE

A. FOOD SERVICE

IV-A-001 Food Storage Facilities
(Ref. 7/1/2009 BJG II-007)

There are sanitary facilities for the storage of all foods that comply with applicable state and/or federal guidelines.

Comment: None
Protocol: Inspection forms.
Documentation: Health Department inspection reports. Documentation of corrective action. Internal inspection report.

IV-A-002 Food Service Facilities
(Ref. 7/1/2009 BJG II-008)

Toilet and hand basin facilities are available to food service personnel in the food preparation area.

Comment: None
Protocol: Laws and regulations.
Documentation: Health Department inspection reports. Photos.

IV-A-003 Food/Dietary Allowances (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG IV-003, ACA CJS 1-4A-01, Department Regulation IS-C-
The facility’s dietary allowances are reviewed at least annually by a qualified nutritionist or dietician to ensure they meet the national recommended dietary allowances for basic nutrition for appropriate age groups. Menu evaluations are conducted at least quarterly by food service supervisory staff to verify adherence to the established basic daily servings. Written policy, procedure, and practice require that food service staff plan menus and substantially follow the plan. The planning and preparation of all meals shall take into consideration nutritional characteristics and caloric adequacy. The facility shall provide a tray/plate and utensil(s) for each hot meal.

Comment: Copies of menu evaluations should be sent to the facility’s health authority. Qualified refers to a person whose training, education and/or experience specifically qualifies him or her to do the job indicated in the guideline.


Documentation: Annual reviews. Nutritionist or dietician qualifications. Documentation of at least annual review and quarterly menu evaluations.

IV-A-004 Records of Meals Served
(Ref. 7/1/2009 BJG IV-004, Department Regulation IS-C-1)

Written policy, procedure, and practice require that accurate records are maintained of all meals served.

Comment: None

Protocol: Written policy and procedure.

Documentation: Facility logs.

IV-A-005 Denial of Food as Discipline Prohibited
(Ref. 7/1/2009 BJG IV-005, Department Regulation IS-C-1)

Written policy, procedure, and practice preclude the denial of food as a disciplinary measure.

Comment: None

Protocol: Written policy and procedure.

Documentation: Facility logs.

IV-A-006 Food Service Management (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG IV-006, ACA CJS 1-4A-06, Department Regulation IS-C-1)

Written policy, procedure, and practice require that three meals (including two
hot meals) are provided under staff supervision at regular meal times during each 24-hour period, with no more than 14 hours between the evening meal and breakfast. Variations may be allowed based on weekend and holiday food service demands provided basic nutritional goals are met. Offenders shall be provided ample opportunity to eat for each meal.

Comment: None
Documentation: Records of meals served and times served. Facility logs.

IV-A-007 Therapeutic/Special Diets
(Ref. 7/1/2009 BJG IV-007, ACA CJS 1-4A-02, Department Regulation IS-C-1)

Therapeutic and/or special diets are provided as prescribed by appropriate clinicians or when religious beliefs require adherence to religious dietary laws. Written policy, procedure, and practice provide for special diets as prescribed by appropriate medical or dental personnel.

Comment: Therapeutic diets are prepared and served to offenders according to orders of the treating clinician or as directed by the responsible health official. Prescriptions for therapeutic diets should be furnished in writing to the food service manager, and rewritten quarterly. Therapeutic diets should be kept as simple as possible and conform as closely as possible to foods served other offenders. Offenders should not be required to take foods that are forbidden by their faiths and a nutritionally acceptable alternative shall be provided as a replacement when objectionable food is the main entrée.
Documentation: Health records. Diet records or forms. Documentation of Warden’s approval of religious diet.

IV-A-008 Health Protection for Food Service
(Ref. ACA CJS 1-4A-04, Department Regulation IS-C-1)

There is adequate protection for all offenders and staff in the facility and for offenders and other persons working in food service. All persons involved in the preparation of the food receive a pre-assignment inspection, by appropriate kitchen staff, to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils. Offenders working in food services are monitored each day for health and cleanliness by appropriate kitchen staff. All food handlers are instructed to wash their hands upon reporting to duty and after using toilet facilities.

Comment: None
Protocol: Written policy and procedure.
**Documentation**: Inspection reports, completed forms. Documentation of daily monitoring for health and cleanliness.

### B. Hygiene

**IV-B-001**  Plumbing Fixtures – Toilets and Washbasins (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG II-005, ACA CJS 1-4B-04)

Offenders have access to toilets and washbasins with temperature-controlled hot and cold running water 24 hours per day. Offenders are able to use toilet facilities without staff assistance when they are confined in their cells/sleeping areas.

**Comment**: Sanitary Code temperature ranges.

**Protocol**: Written policy and procedure.

**Documentation**: Maintenance records or reports. Inspections. Documentation of periodic measurement of water temperature. Photos.

**IV-B-002**  Plumbing Fixtures – Showers (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG II-006, ACA CJS 1-4B-04)

Offenders, including those in medical housing units or infirmaries, have access to operable showers with temperature-controlled hot and cold running water 24 hours per day, on a reasonable schedule, (a minimum of three times per week). Water for showers is thermostatically controlled to temperatures ranging from 100 degrees to 120 degrees Fahrenheit.

**Comment**: None

**Protocol**: Written policy and procedure.

**Documentation**: Maintenance records or reports. Documentation of periodic measurement of water temperature. Inspections. Photos.

**IV-B-003**  Clothing
(Ref. 7/1/2009 BJG IV-010, ACA CJS 1-4B-02)

The facility has an obligation to provide adequate institutional clothing appropriate to the season and the offender’s work status, including adequate changes of clothing to allow for regular laundering. The facility may fulfill this obligation by furnishing clothing or permitting the offender to secure and wear his own clothing, except that when the offender does not provide adequate clothing for himself, the facility shall furnish same.

**Comment**: None
IV-B-004    **Hygiene/Bedding Issue**  
(Ref. 7/1/2009 BJG IV-011, ACA CJS 1-4B-01)

The facility shall provide adequate bedding and linen, including a clean mattress, sheets, pillow and blanket, not to exclude a mattress with integrated pillow. There are provisions for linen and towel exchange at least weekly. There are provisions for blanket exchange at least monthly.

**Comment:**  None

**Protocol:** Written policy and procedure.  
**Documentation:** Documentation of issue and exchange.

IV-B-005    **Personal Hygiene (MANDATORY – ANNUAL REVIEW)**  
(Ref. 7/1/2009 BJG IV-012, ACA CJS 1-4B-03, Department Regulation IS-C-3)

Articles and services necessary for maintaining personal hygiene shall be available to all offenders including items specifically needed for females. Such items shall be provided to any offender (male or female) who is indigent. Each offender shall be provided soap, toilet paper, toothbrush, toothpaste, and shaving equipment.

**Comment:**  None

**Protocol:** Written policy and procedure.  
**Documentation:** Documentation that items are provided. List of items available.

C. **CONTINUUM OF HEALTH CARE SERVICES**

IV-C-001    **Access to Care/Clinical Services (REVISED) (MANDATORY – ANNUAL REVIEW)**  
(Ref. 7/1/2009 BJG IV-013, ACA CJS 1-4C-01, 1-4D-01, 1-4D-03, 1-4D-04, 1-4C-08, Department Regulations IS-D-2 HCP14, and AM-C-4)

At the time of admission/intake, all offenders are informed about procedures to access health services, including any copay requirements, as well as procedures for submitting grievances. Medical care is not denied based on an offender’s ability to pay. The facility has a designated health authority with responsibility for health care services. The health authority is the health administrator, or agency responsible for the provision of the health care services at an institution; the responsible physician may be the health authority. When the health authority is other than a physician, final clinical judgments rest
with a single, designated, responsible physician.

- Written policy, procedure, and practice provide for the delivery of health care services, including medical, mental health, dental and behavioral health services under the control of a designated health care authority who shall be a physician or a licensed or registered health care provider or health agency. Access to these services shall be unimpeded in the sense that correctional staff should not approve or disapprove offender requests for services in accordance with the facility's health care plan. Oral health services include access to diagnostic x-rays, treatment of dental pain, development of individual treatment plans, extractions of non-restorable teeth, and referral to a dental specialist, including an oral surgeon. Specialty non primary clinical services are covered by DPS&C. The requests shall be submitted by the facility staff using the software provided by DPS&C.

- In accordance with La. R.S. 15:831, DPS&C offenders may be assessed a co-payment for receiving medical or dental treatment, including prescription or nonprescription drugs. The co-payment fee schedule shall be approved by the DPS&C. Such fee schedule for DPS&C offenders housed in local jail facilities shall not exceed the DPS&C approved rate in accordance with Department Regulation HCP14, unless prior approval has been granted by the Secretary of the DPS&C.

- DPS&C offenders may be required to file a claim with his/her private medical or health care insurer, or any public medical assistance program, under which he/she is covered and from which the offender may make a claim for payment or reimbursement of the cost of any such medical treatment.

Comment: Any revision to copayment fee schedule requires approval of the DPS&C.  
Protocol: Written policy and procedure.  
Documentation: Documentation that offenders are informed about health care and the grievance system. A health record. Medical copayment fee schedule.

IV-C-002 Adequate Equipment and Supplies (REVISED)  
(Ref. 7/1/2009 BJG IV-014)

Adequate equipment and supplies for medical services are provided as determined by the health care authority and are in working order. This includes but is not limited to the following; automatic external defibrillators (AEDs) available and in working order, a stock of first aid supplies for the treatment of minor injuries, ambu bag, and a cut down tool.
IV-C-003  Provision of Treatment (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG IV-015, ACA CJS 1-4D-01, 1-4D-04, Department Regulation IS-D-2)

The facility has a designated health authority responsible for health care services. Requests for health services are triaged by health trained persons to ensure that needs are addressed in a timely manner in accordance with the severity of the illness. Written policy, procedure, and practice provide that anyone who provides health care services to offenders be licensed, registered, or certified as appropriate to their respective professional disciplines. Such personnel shall only practice as authorized by their license, registration, or certification. Standing orders are used in the treatment of offenders only when authorized in writing by a physician or dentist (Standing orders are used in the treatment of identified conditions and for the on-site emergency treatment of an offender).

Comment: The health authority is responsible for arranging all levels of health services, assuring the quality of all health services, and assuring that offenders have access to them.
Protocol: Written policy and procedure. Sample agreement or contract requirements with health care provider or authority. Job description.

IV-C-004  Personnel Qualifications/Credentials
(Ref. 7/1/2009 BJG IV-016, ACA CJS 1-4C-15, 1-4D-04)

Correctional or other personnel who do not have health care licenses may only provide limited health care services as authorized by the responsible health care authority and in accordance with appropriate training. This would typically involve the administration of medication, the following of standing orders as authorized by the responsible health care authority and the administration of first aid/CPR in accordance with POST training. Written policy, procedure and practice approved by the health authority require dispensing and administering prescribed medications by qualified personnel.

Comment: Standing medical orders are for the definitive treatment of identified condition. Qualified refers to a person whose training, education and/or experience specifically qualifies
him or her to do the job indicated in the guideline.


IV-C-005 24 Hour Care (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG IV-017, ACA CJS 1-4C-03, 1-4C-08)

Written policy, procedure, and practice ensure that offenders have access to 24-hour emergency medical, dental, and behavioral health services, including on-site first aid, basic life support, and transfer to community based services. This requirement may be met by agreement with a local state hospital, a local private hospital, on-call qualified health care personnel (see IV-C-003), or on-duty qualified health care personnel. Decisions regarding access to emergency medical services shall not be the sole province of correctional or other non-health personnel except in accordance with IV-C-004.

Comment: In the event that primary health services are not available back-up facilities or providers should be pre-determined. Qualified refers to a person who has the education, credentials, and experience and is permitted by law, within the scope of his or her professional practice act to evaluate and care for patients.

Protocol: Written policy and procedure.


IV-C-006 Health Screens
(Ref. 7/1/2009 BJG IV-018, ACA CJS 1-4C-09, 1-4C-10, 1-2A-14, Department Regulation HCP16)

Written policy, procedure, and practice require that all DPS&C offenders receive a health screening by health trained or qualified health care personnel upon intake into the facility unless there is documentation of a health screening within the previous 90 days. Screening is conducted in accordance with protocols established by the health authority. If completed by health trained personnel, all intake health screens are to be reviewed by health care personnel as soon as possible. If a facility uses a different screening form it shall be required to have at a minimum the questions in the Intake Health Care Screening form (IV-C-006-A) provided by DPS&C. The purpose of the health screening is to protect newly admitted offenders who pose a health safety threat to themselves or others from not receiving adequate medical attention. This should include inquiry into:

1. Current medical, dental, or behavioral health problems and
communicable diseases;
2. Current treatment plan;
3. Current medications, including psychotropic;
4. History of hospitalization;
5. Suicidal risk assessment;
6. Use of alcohol or other drugs including need for possible detoxification;
7. Possibility of pregnancy;
8. Observation of the following:
   a. Appearance and behavior;
   b. Body deformities and other physical abnormalities;
   c. Ease of movement;
   d. Current physical traumas or characteristics and a determination of whether or not the offender should be recommended for immediate transfer to the DPS&C for appropriate care;
   e. Any physical impairment (hearing, vision, mobility) or other disability which would impede the offender’s access to programs or services. Offenders identified with such impairment or disability shall be transferred to the DPS&C for further evaluation and determination of appropriate housing placement. [Ref. 2008 Resolution Agreement: U.S. Department of Justice and Louisiana Department of Public Safety and Corrections.]

Comment: Health screening is necessary to detect offenders who pose a health or safety threat to themselves or others and who may require immediate health care. Health trained refers to correctional officers or other correctional staff who may be trained and appropriately supervised to carry out specific duties with regard to the administration of health care. Qualified refers to a person who has the education, credentials, and experience and is permitted by law, within the scope of his or her professional practice act to evaluate and care for patients. (See also II-A-010 for non-medical admission processes for newly admitted offenders.)


IV-C-006-1 Pregnancy Management (REVISED) (MANDATORY – ANNUAL REVIEW)
(Ref. ACA CJS 1-4C-05)(Ref. Department Regulation HCP33)

Written policy, procedure and practice require that all pregnant offenders have access to obstetrical services by a qualified provider, including prenatal, peripartum, and postpartum care.

The local jail facility shall notify the Department’s Medical Director when a DPS&C offender is pregnant to ensure proper placement in a DPS&C facility, including transfer if necessary.
Transfer to a DPS&C facility is determined by the Department's Medical Director, in conjunction with LCIW's health care staff.

IV-C-007 Communicable Disease and Infection Control Program (Ref. ACA CJS 1-4C-06) (REVISED)

Communicable diseases are managed in accordance with a written plan approved by the health authority in consultation with local public health officials. The plan includes for the screening, surveillance, treatment, containment, and reporting of infectious diseases. The plan shall comprise of testing to detect communicable diseases, including TB testing, HIV testing, and HCV testing within 14 days of arrival at the facility. If there is documented evidence of TB, HIV, or HCV testing within the last 12 months, new testing is not required. Qualified health care staff will evaluate for signs and symptoms of TB. Infection control measures include the availability of personal protective equipment for staff and hand hygiene promotion throughout the facility. Procedures for handling biohazardous waste and decontaminating medical and dental equipment must comply with applicable local, state, and federal regulations.

Comment: Communicable diseases require special attention.
Documentation: Health records. Clinic visit logs. Documentation of waste pick up and/or cleaning logs.

IV-C-008 Annual TB Testing (REVISED)
(Ref. 7/1/2009 BJG IV-018-1, IV-018-2, Department Regulation HCP22)

Written policy, procedure, and practice require annual testing or medical evaluation for signs and/or symptoms of tuberculosis on all offenders. Annual TB testing will be provided at no cost to the offender. The facility's designated health care authority shall contact the DPS&C Medical Director, telephone number 225-342-1320, when an offender's test for medical signs and/or symptoms of tuberculosis is reported positive. The DPS&C Medical Director will determine if the offender requires healthcare practitioner evaluation, based on the reported positive signs or symptoms.

Comment: None
Protocol: Written policy and procedure.
Documentation: Health records.

IV-C-009 Chronic Care Program (REVISED) (MANDATORY – ANNUAL REVIEW)
(Ref. ACA CJS 1-4C-07, Department Regulation HCP34)
At a minimum, offenders with the chronic conditions, diabetes, hypertension, congestive heart failure, asthma, HIV, seizures, conditions requiring Coumadin therapy, or mental illness receive periodic evaluations by a qualified health care provider in accordance with individual chronic care plans. For offenders whose chronic disease cannot be reasonably managed by the local jail facility, a Medical/Mental Health Transfer Request for DOC Offenders at Local Facilities Form JO-1-b shall be completed and email to DOC Headquarters Medical Department at HQ-Medical-MentalHealthtransfers@la.gov. The intake screening form and any other supporting documentation shall also be included when requesting transfers.

**Comment:** Chronic care guidelines are available from disease-specific organizations and various medical and physicians’ associations. Qualified health care provider refers to a person who has the education, credentials and experience and is permitted by law, within the scope of his or her professional practice act, to evaluate and care for patients.

**Protocol:** Written policy and procedure. Chronic care protocols.

**Documentation:** Health records.

**IV-C-010 Pharmaceuticals**
(Ref. 7/1/2009 BJG IV-019, ACA CJS 1-4C-15, Department Regulation HCP7)

Written policy, procedure, and practice approved by the health authority provide for the proper management of pharmaceuticals. Offenders are provided medication as prescribed.

**Comment:** None

**Protocol:** Written policy and procedure approved by health authority. Format for documentation of medication, inventory, and storage of medication.

**Documentation:** Health records, completed medication administration forms, inventories.

**IV-C-011 First Aid Kits**
(Ref. 7/1/2009 BJG IV-020)

First aid kits are available in areas of the facility as designated by the responsible health care authority and shall be immediately accessible to housing units.

**Comment:** Periodic checks of first aid kits are encouraged to ensure kits are still current (not expired).

**Protocol:** Written policy and procedure.
Access to Sick Call (MANDATORY – ANNUAL REVIEW)  
(Ref. 7/1/2009 BJG IV-021, ACA CJS 1-4C-01, Department Regulation HCP13)

There is a process for all offenders to initiate requests for health services on a daily basis. Written policy, procedure, and practice require that sick call is conducted by a physician and/or other qualified health care personnel who are licensed, registered, or certified as appropriate to their respective professional discipline and who practice only as authorized by their license, registration, or certification. Sick call shall be available to all offenders as follows:

- Facilities with fewer than 100 offenders - 1 time per week;
- Facilities with 100 to 300 offenders - 3 times per week;
- Facilities with more than 300 offenders - 4 times per week.

If an offender’s custody status precludes attendance at sick call, then arrangements shall be made to provide such services in the place of the offender’s detention.

Comment: Qualified refers to a person who has the education, credentials and experience and is permitted by law, within the scope of his or her professional practice act, to evaluate and care for patients.

Protocol: Written policy and procedure.

Documentation: Sick call request form. Health record.

Infirmary Care (REVISED)  
(Ref. 7/1/2009 BJG IV-022, ACA CJS 1-4C-04, Department Regulation HCP20)

If infirmary care is provided onsite, it complies with applicable state regulations and local licensing requirements. Provisions include 24-hour emergency on-call consultation with a physician, dentist and behavioral health professional. Written policy, procedure and practice provide that any offender who is identified as requiring a medical, dental, or behavioral health need for which care is not readily available from the local facility shall be immediately transferred to DPS&C. It is particularly important that smaller facilities recognize the commitment of the DPS&C to accept into their custody any DPS&C offender whose condition is problematic.

Comment: To ensure appropriate and coordinated transfer of healthcare management of DPS&C offenders in local jails who have health/mental health needs, DPS&C form JO-1-b shall be completed in its entirety and submitted to DPS&C’s Chief Nursing Officer by email at...
Medical-MentalHealthtransfers@la.gov or by fax to 225-342-1329.

The intake screening form and any other supporting documentation shall also be included when requesting transfer.

**Protocol**: Written policy or procedure.

**Documentation**: Admission or inpatient records. Staffing schedule. Completed form J0-1-b.

### IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, Compassionate Release) (REVISED)

(Ref. Department Regulations HCP41, HCP42, and HCP46)

Any offender sentenced to DPS&C custody that meets the medical criteria to be released on Medical Parole, Medical Treatment Furlough or Compassionate Release may be considered after submission of the required documentation in accordance with the corresponding Department Regulation to the DPS&C’s Chief Nursing Officer via email to HQ-Medical-MentalHealthTransfers@la.gov or by fax to 225-342-1329.

**Comment**: None

**Protocol**: Written policy and procedure. Submittal of paperwork to DPS&C’s Chief Nursing Officer.

**Documentation**: Health records. Documentation of approval of DPS&C’s Chief Nursing Officer.

### IV-C-014 Suicide Prevention and Intervention (REVISED) (MANDATORY – ANNUAL REVIEW)

(Ref. 7/1/2009 BJG IV-023, ACA CJS 1-4C-13, Department Regulation HCP30)

There is a written suicide prevention and intervention program that is approved by a behavioral health professional who meets the educational and license/certification criteria specified by his/her respective professional discipline. The program must include specific procedures for handling intake, screening, identifying and continually supervising the suicide-prone offender. All suicide attempts and completions will be reported to the Mental Health Director of DPS&C at mentalhealth@doc.la.gov or (225)202-809. Observation of the suicide-prone offender will vary from continual observation to intervals no greater than fifteen (15) minutes. All staff with responsibility for offender supervision are trained annually in the implementation of the program.

Such procedures also shall include the reporting requirements as outlined in BJG 1-C-001.

**Comment**: A suicide attempt is defined as a self-injurious act which would result in death without intervention.

**Protocol**: Written policy and procedure. Training curriculum. Suicide-watch
orders, suicide watch review notes, and suicide watch logs. Written suicide program approved by behavioral health professional.

**Documentation:** Health records. Documentation of staff training. Documentation of suicide watches.

**IV-C-015 Offender Deaths (MANDATORY – ANNUAL REVIEW)**
(Ref. 7/1/2009 BJG IV-024, Department Regulation AM-I-4)

Written policy, procedure, and practice specify and govern the actions to be taken in the event of an offender’s death, which includes notification of the coroner of all offender deaths. All attempts to contact the coroner regarding any death shall be thoroughly documented. Such procedures shall also include the reporting requirements as outlined in BJG I-C-001. In addition, a written report of all offender deaths shall be submitted to DPS&C on Form AM-I-4-x (via email to DOC-HQ_Cat_A_Notfications@la.gov or via fax to 225-342-3349).

**Comment:** None

**Protocol:** Written policy and procedure.

**Documentation:** Notification. Reporting requirements. Report to DPS&C.

**IV-C-016 Notification (REVISED)**
(Ref. ACA CJS 1-4D-06., Department Regulation OP-C-9, La. R.S. 15:833A)

A visit with an immediate family member shall be granted when an offender is admitted to an intensive care unit (ICU) or trauma center due to a serious bodily injury or due to being a terminally ill offender for the duration of the offender’s admission to the ICU or trauma center, unless the Warden or designee provides written notice within 6 hours of the offender’s admission to the ICU or trauma center to any immediate family member seeking visitation why such visitation cannot be granted, pursuant to La. R.S. 15:833(A) and Department Regulation OP-C-9;

- If the offender’s admission to the ICU or trauma center occurs between 8:00 p.m. and 4:00 a.m., the Warden or designee shall provide the required written notification within 24 hours of the time the serious bodily injury occurred.
- Pursuant to La. R.S. 15:833(A), the Warden or designee shall attempt to notify the offender’s immediate family within 8 hours of the medical decision to transport the offender to the ICU or trauma center.
- Based on extenuating circumstances, the Warden or designee may extend the definition of an offender’s immediate family member.
Comment: The persons to be notified should be designated in writing as part of the facility’s admissions procedures.
Protocol: Written policy and procedure.
Documentation: Notification records.

D. HEALTH SERVICES STAFF

IV-D-001 Healthcare Quarterly Meetings (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG I-003, ACA CJS 1-4D-02)

The health authority meets with the facility administrator at least quarterly.

Comment: Minutes of quarterly administrative meetings may be used to meet the requirements for a quarterly report.
Protocol: Written policy and procedure.
Documentation: Documentation of meetings.

IV-D-002 Research
(Ref. 7/1/2009 BJG I-012, ACA CJS 1-4D-10)

Written policy, procedure, and practice prohibit offender participation in pharmaceutical, medical, or cosmetic experiments. This policy does not preclude individual treatment of an offender based on his/her needs using a specific medical procedure that is not generally available.

Comment: None
Protocol: Written policy and procedure.

IV-D-003 Health Care Personnel/Job Descriptions
(Ref. ACA CJS 1-4D-04)

Health care staff work in accordance with professional specific job descriptions approved by the health authority.

Comment: None
Protocol: Written policy and procedure.
Documentation: Job descriptions.

IV-D-004 Confidentiality of Health Information/Individual Health Record
(Ref. ACA CJS 1-4D-07, 1-4D-18, Department Regulations AM-D-5 and HCP9)

Information about an offender’s health status is confidential. Nonmedical staff only have access to specific medical information on a “need to know” basis in
order to preserve the health and safety of the specific offender, other offenders, volunteers, visitors, or correctional staff.

An individual health record is maintained for all offenders in accordance with policies and procedures established by the health authority. The health record is made available to, and is used for documentation by all health care personnel. The active health record is maintained separately from the confinement case record and access is controlled. When an offender is transferred to DPS&C or another local facility, the offender's medical record is transferred as well.

**Comment:** See also II-A-008 for records/information that must be transferred with an offender who is transferred to another local jail facility or DPS&C facility.  
**Protocol:** Written policy and procedure. Consent or authorization form.  
**Documentation:** Health records. Completed consent forms. Completed refusal forms.

### IV-D-005 Informed Consent
*(Ref. ACA CJS 1-4D-08, 1-4D-09, Department Regulation HCP10)*

Informed consent standards of the jurisdiction are observed and documented for offender care in a language understood by the offender. In the case of minors, the information consent of a parent, guardian, or legal custodian applies, when required by law. Offenders routinely have the right to refuse medical interventions. When health care is rendered against an offender’s will, it is in accordance with state laws and regulations. Involuntary administration of psychotropic medications to offenders may only be accomplished by DPS&C.

**Comment:** None  
**Protocol:** Written policy and procedure. Consent or authorization form.  
**Documentation:** Health records. Completed consent forms. Completed refusal forms.

### IV-D-006 Emergency Response
*(Ref. ACA CJS 1-4D-05, Department Regulation HCP44)*

Emergency medical care, including first aid and basic life support, is provided by all health care professionals and those health-trained correctional staff specifically designated by the facility administrator. All staff responding to health emergencies are trained in CPR. The health authority approves policies and procedures that ensure that emergency supplies and equipment, including automatic external defibrillators (AEDs) are readily available and in working order.

**Comment:** The facility administrator or health authority may designate those correctional officers who have responsibility for responding to health emergencies.  
**Protocols:** Written policy and procedure.
IV-D-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (NEW) (MANDATORY – ANNUAL REVIEW) (Ref. Department Regulation No. HCP49)

Written policy, procedure, and practice require that presumptively intoxicated offenders are assessed immediately by medical personnel in order to provide lifesaving intervention and make a determination of need for offsite medical attention.

Written policy, procedure, and practice provide for access to Naloxone for officers and medical staff, as well as training for its administration.

**Comment:** The facility administrator or health authority may designate those correctional officers who have responsibility for responding to health emergencies.

**Protocols:** Written policy and procedure.

**Documentation:** Verification of training and availability of Naloxone. Records and certificates.

IV-D-007 Internal Review/Quality Assurance (MANDATORY – ANNUAL REVIEW) (Ref. ACA CJS 1-4D-17)

The health authority approves policies and procedures for identifying and evaluating major risk management events related to offender health care, including offender deaths, preventable adverse outcomes and serious medication errors.

**Comment:** Reviews/reports can be facilitated by regular participation of the facility administrator and health authority. Evaluating data should result in more effective provision of health care services.

**Protocol:** Written policy and procedure.

**Documentation:** Evaluation of major risk management events.

E. Sexual Assault


Written policy, procedure, and practice provide for the prevention, detection, response, reporting and investigating of alleged and substantiated sexual assaults. (Prison Rape Elimination Act – PREA) Information provided to offenders about sexual abuse/assault includes:
• Prevention/intervention;
• Self-protection;
• Multiple channels of reporting sexual assault and sexual misconduct;
• Protection from retaliation;
• Treatment and counseling; and
• DPS&C zero tolerance for sexual assault and sexual misconduct

When the occurrence/allegation of sexual assault or threat involves a DPS&C offender, the facility shall report the incident to DPS&C immediately, as outlined in BJG I-C-001.

An investigation is conducted and documented whenever a sexual assault or threat is reported. Investigative reports shall be submitted to the appropriate DPS&C Regional BJG Team Leader on Form OP-A-15-e “Standardized Case Report Form.” The Regional BJG Team Leader shall forward any investigation report to the DPS&C PREA Investigation Colonel at Joel.Odom@la.gov.

Victims of sexual assault are referred under appropriate security provisions to a community facility for treatment and gathering of evidence.

Comment: The facility should report occurrences/allegations of sexual assault or threat to DPS&C offenders to DPS&C immediately.
Documentation: Documentation of reports to DPS&C. Investigative reports.

PART V. OFFENDER PROGRAMS AND ACTIVITY

A. OFFENDER OPPORTUNITIES FOR IMPROVEMENT

V-A-001 Volunteers/Registration
(Ref. 7/1/2009 BJG I-013)

There is an official registration and identification system for volunteers.

Comment: None
Protocol: Written policy and procedure.
Documentation: Approved volunteer application/request. Volunteer identification.

V-A-002 Volunteer Services
(Ref. 7/1/2009 BJG I-014, Department Regulation PS-F-1)

A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility.
Comment: None

Protocol: Written policy and procedure.

Documentation: Activity schedules. Facility logs.

V-A-003 Visiting
(Ref. 7/1/2009 BJG V-002, ACA CJS 1-5B-01, 1-5B-01-1, 1-5B-01-2, 1-5B-01-3; Department Regulation OP-C-9)

Written policy, procedure, and practice govern visiting. The number of visitors an offender may receive and the length of the visits may be limited only by the facility's schedule, space, and personnel constraints, or when the facility administrator can present clear and convincing evidence that such visitation jeopardizes the safety and security of the facility. Conditions under which visits may be denied and visitors may be searched are defined in writing. Provisions are made for special visits in accordance with Department Regulation OP-C-9.

Comment: None

Protocol: Written policy and procedure.

Documentation: Activity schedules. Facility logs.

V-A-004 Religious Programs
(Ref. 7/1/2009 BJG V-004; ACA CJS 1-5C-06; Department Regulation PS-E-1)

Written policy, procedure, and practice define and provide reasonable offender opportunity for religious practice.

Comment: None.

Protocol: Written policy and procedure.

Documentation: Documentation of offender religious activities. Activity schedule.

V-A-005 Exercise and Recreation Access (MANDATORY – ANNUAL REVIEW)
(Ref. 7/1/2009 BJG V-005; ACA CJS 1-5C-01; Department Regulation PS-I-1)

Offenders have access to exercise and recreation opportunities. Written policy, procedure, and practice provide for exercise opportunities adequate to ensure major muscle activity. Outdoor exercise shall be available on a regular basis (at least three times per week-weather permitting) for DPS&C offenders. If a DPS&C offender requires special management or has security supervision needs which preclude the opportunity for outdoor exercise at a facility, then he or she shall be transferred to the DPS&C. If a facility based on location, or other legitimate concern, does not make provision for outdoor exercise, then compensating dedicated exercise facilities of adequate size to provide three exercise opportunities per week shall be available.

Comment: None.
B. PROGRAMS AND SERVICES

V-B-001 Programs and Services (REVISED)
(Ref. 7/1/2009 BJG V-001; ACA CJS 1-5A-01)

Written policy, procedure, and practice provide for the availability of offender programs, services, and counseling. Such programming may be obtained from acceptable internal or external sources which should include, at a minimum, assistance in obtaining individualized educational program instruction at a variety of levels.

The local jail facility shall maintain class files on all DPS&C approved programming, whether the program is administered by DPS&C or other staff. The class files should include at a minimum:

1. Screening of the offender(s) for program placement;
2. Offender application to program;
3. Program sign-in sheets and/or attendance rosters;
4. Student Education Records shall be maintained at the facility. The student record includes but is not limited to the WorkReady U Intake form (which includes Demographics, Self-Disclosure Information, Release Statement, Family Educational Rights and Privacy Act-FERPA, Grievance Procedure, Class Rules, test scores, certificates, diplomas, etc.);
5. Copies of certificates of program completion, skills certifications, etc.;
6. Signed copy of CTRP credit forms;
7. Documentation for staff oversight if program is not administered and/or overseen by DPS&C staff; and/or
8. Signed Reentry Preparation Refusal form if offender refused program.

Comment: None.

Protocol: Written policy and procedure.
Documentation: Activity schedules. Facility logs.

V-B-002 Educational Programming (REVISED)
(Ref. 7/1/2009 BJG V-001; ACA CJS 1-5A-01)

The DPS&C and the facility encourage educational programming which includes:

1. Adult Basic Education and/or Literacy;
2. Industry Based Certification Training;
3. Pell-eligible Post-Secondary Training;
4. Peer Tutor/Mentor Implementation.
Any planned or proposed programs for education in local jail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director for review and approval. If the DPS&C implements the educational program in cooperation with the facility, compliance measures must be followed to abide by the terms of the funding sources, as well as state and federal regulations.

A determination of ATLO needs will be determined with the facility during implantation of education programs. During this time the party responsible for cost of ATLO lab, devices, etc. will be determined.

In some cases, technology is utilized for Education and Reentry purposes (ATLO Software). This will be determined during the needs assessment of the facility. The cost of ATLO lab and services will be determined.

Comment: None.
Protocol: Written policy and procedure.

V-B-003 Substance Abuse Programs (REVISED)
(Ref. 7/1/2009 BJG VII-001; Department Regulation HCP31)

The facility encourages offender participation in substance abuse programs when available.

The continuum of substance abuse programming includes:
1. Substance Abuse Education/Relapse Prevention;
2. 12 Step Recovery Meetings (i.e., Alcoholics Anonymous/Narcotics Anonymous);

Provisions for offender referrals and transfers to DPS&C approved intensive residential substance abuse programs are made prior to placement in a transitional work program or release from custody.

Comment: Participation in substance abuse programs can enhance an offender’s successful reentry.

V-B-004 Library Services
(Ref. 7/1/2009 BJG V-003; ACA 1-5C-04)

Reading materials shall be available to offenders on a reasonable basis.

Comment: None.
Protocol: Written policy and procedure.
Mail and Correspondence
(Ref. 7/1/2009 BJG VI-001; ACA CJS 1-5B-02, 1-5B-02-1, and 1-5B-02-2; Department Regulation OP-C-7)

Offenders may send and receive mail. Indigent offenders shall have access to postage necessary to send two personal letters per week, postage necessary to send out approved legal mail. Offenders are notified in writing when incoming or outgoing letters are withheld in part or in full. Written policy, procedure, and practice govern offender correspondence. Such policy shall include the following provisions:

1. Both incoming and outgoing offender mail (except privileged mail) may be opened and inspected for contraband. Mail may be read or rejected only when the facility administrator or his designee determines through relevant information that the correspondence contains material that interferes with legitimate penological objectives (including but not limited to deterrence of crime, rehabilitation of offenders, or maintenance of internal/external security of a facility);

2. Privileged correspondence is defined as mail to or from:
   a. Identifiable courts;
   b. Identifiable prosecuting attorneys;
   c. Identifiable Probation and Parole Officers, Parole and Board of Pardons;
   d. State and local chief executive officers;
   e. Identifiable attorneys;
   f. Secretary, Deputy Secretary, Chief of Operations, Undersecretary, Assistant Secretary and other officials and administrators of the grievance system of the DPS&C;
   g. Local, state, or federal law enforcement agencies and officials.

3. Incoming privileged correspondence shall not be opened or inspected except in the presence of the offender to verify that the correspondence does not contain material that is not entitled to privilege;

4. Outgoing privileged mail may be posted sealed;

5. Incoming and outgoing privileged mail may be opened and inspected outside the offender’s presence in the following circumstances:
   a. Letters that are unusual in appearance or appear different from mail normally received or sent by the individual or public entity;
   b. Letters that are of a size or shape not customarily received or sent by the individual or public entity;
   c. Letters that have a city and/or state postmark that is different from the return address;
   d. Letters that are leaking, stained, or emitting a strange or unusual odor or have a powdery residue; and/or
   e. When reasonable suspicion of illicit activity has resulted in a formal investigation and such inspection has been authorized by the Secretary or designee.
Comment: None.
Documentation: Documentation that offenders are notified when mail is withheld. Documentation of justification for reading or rejecting mail. Documentation of receipt of mail.

V-B-006 Packages and Publications
(Ref. 7/1/2009 BJG VI-002; Department Regulation OP-C-7)

Written policy, procedure, and practice govern offender access to publication and packages from outside source.

Comment: None.
Documentation: Documentation that offenders are notified when publication/package is withheld. Documentation of justification for reading/opening or rejecting publication/package. Documentation of receipt of publication/package.

V-B-007 Canteen/Commissary Spending Limits (NEW)

The offender commissary spending limit shall be $200.

Comment: None.
Documentation: Copy of canteen store sheet, invoice, receipt, etc.

C. REENTRY

V-C-001 Releasing Offenders (REVISED)
(Ref. 7/1/2009 BJG IV-019-1; ACA CJS 1-4C-02 and 1-5B-04; La. R.S. 15:866.1; Department Regulations HCP17, PS-C-1, and AM-C-2)

Procedures for releasing offenders from the facility include, but are not limited to, the following:

- Return of personal property, to include any government issued identification card (i.e., driver’s license) that may have been collected from the offender during the intake process.
- Provide offender with/and have him/her sign for any DPS&C Transition Document Envelopes (TDE) and all its contents if present at the facility. Otherwise, inform offender their TDE (if they have one) will be mailed to their release address on record.
• Provision of a listing of available community resources.
• Consideration by the prescribing health care practitioner for a provision of a 5-day supply of current maintenance medication (medication prescribed to stabilize a chronic medical or behavioral health illness), along with a prescription for thirty (30) days of medication upon transfer or discharge.
• Prior to release, offenders with serious medical and behavioral health conditions are referred to available community services. All efforts shall be made to schedule any medical/mental health appointments prior to release. Appropriate health information is shared with the new providers in accordance with consent requirements. This information shall be documented in the offender’s medical record.
• Offenders identified as needing transportation, should be afforded a bus ticket from the facility to the residence plan address listed on the release paperwork.
• For offenders with out of state residence plans, screen and complete an ICOT 4-6 months prior to release and submit to local P&P district. If offender has no address, shelter placement shall be done by Local Jail Transitional Specialist or staff.
• Provision of adequate street clothing for indigent offenders. Offenders shall not release in any prison issued attire, including but not limited to jumpsuits, striped scrubs, or stenciled clothing.

Comment: None.

V-C-002 Regional Reentry Programs (REVISED)
(Ref. 7/1/2009 BJG VII-002)

Facilities shall remain in compliance with any separate contract with the facility through which the DPS&C reimburses for reentry programming which includes:

1. Employment opportunities through referral and transfer to transitional work programs, or when inappropriate, for transitional work program placement, enrollment in the Reentry Workforce Portal, and outside service providers to connect discharging offenders with employment opportunities upon release;
2. At least two forms of valid identification upon release, preferably a Louisiana State ID and Social Security Card;
3. The development of a residential plan prior to release;
4. Referral to community based service providers upon release.
5. Ensuring that all DPS&C offenders complete 100 hours of pre-release training at a regional reentry center prior to transfer to a transitional work program or release from custody.
Regional Reentry Programs shall maintain reentry transition document envelopes for all DPS&C offenders housed in local jails in their region, which include at a minimum, if applicable:

1. Any valid forms of identification;
2. Prescriptions and Medicaid card;
3. Community service referrals; and
4. CRANNUAL printed report.

Regional Reentry Programs shall coordinate with local jails and Probation & Parole Districts in their region to insure offenders receive their Transition Document Envelopes (TDE) either prior to release or upon release. Regional Reentry programs shall mail TDE’s to the release address on record for offenders who release full term and cannot be provided the TDE before release.

Comment: Facilities must provide 100 hours of pre-release training in accordance with La. R.S. 15:827 and 827.1, utilizing the DPS&C’s Standardized Pre-Release Curriculum, which is available from the DPS&C Office of Offender Reentry, upon request. See also V-B-001 for guidelines on health care transferred to providers in the community upon release.
Protocol: Written policy and procedure. Community based service provider list.

V-C-003 Pre-Parole Preparation (REVISED) (Ref. Department Regulation IS-B-7)

The facility shall complete Form IS-B-7-c “Pre-Parole TIGER Questionnaire for Local Jail Facilities” and submit via e-mail to DPS&C Headquarters at mleger@la.gov or by fax to 225-342-3095 within the first two weeks of the month preceding the scheduled hearing.

Comment: None
Protocol: Parole board docket.
Documentation: Offender record. Completed questionnaire.

V-C-004 Parole Board Procedures (Ref. Department Regulations IS-B-6 and BOP-3)

The facility Warden or his/her designee, of the local level facility in which the offender is housed, shall be present to provide information to members of the Parole Board regarding the offender’s progress and disciplinary infractions
during incarceration.

Comment: None
Documentation: Offender Record. Trip log. Documentation showing facility Warden or designee presence at parole board.

A. TRANSITIONAL WORK PROGRAMS

V-D-001  Transitional Work Program /Standard Operation Procedures
(Ref. 7/1/2009 BJG V-006; Department Regulation PS-D-3)

Transitional Work Programs shall be operated in accordance with the Standard Operating Procedures for Offender Transitional Work Programs established by DPS&C.

Comment: None.
Protocol: Written policy and procedure. Agreement between DPS&C and LSA.

V-D-002  Participation in Transitional Work Programs
(Ref. 7/1/2009 BJG V-007; Department Regulations IS-B-1 and PS-D-3)

Participation in Transitional Work Programs by DPS&C offenders shall comply with La. R.S. 15:711 and DPS&C Department Regulation IS-B-1 “Assignment and Transfer of Offenders.” Specific approval by the Secretary of DPS&C is required prior to program assignment of DPS&C offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs.

Comment: None.
Protocol: Written policy and procedure.
Documentation: Approval for participation by the Secretary of DPS&C.

V-D-003  Offender Work Programs
(Ref. 7/1/2009 BJG V-008; Department Regulation PS-D-3)

Participation in Offender Work Programs by DPS&C offenders shall comply with the provisions of La. R.S. 15:708 (parish jails) or La. R.S. 15:832 (police maintenance).

Comment: Regulation should establish criteria for the selection of offenders, security, and discipline. No sex offenders should be assigned to offender work programs outside the facility.
Documentation: Offender voluntary participation. Sheriff’s approval of work program request. Facility logs.

V-D-004  Approval for Transitional Work Programs
(Ref. 7/1/2009 BJG V-009; Department Regulation PS-D-3)
Any sheriff interested in operation of a Transitional Work Program facility shall obtain prior approval from the Chief of Operations. Refer to Standard Operating Procedures for Offender Transitional Work Programs.

Comment: None.
Protocol: Written policy and procedure.
Documentation: Approval of Chief of Operations.

PART VI. JUSTICE

A. OFFENDER’S RIGHTS

VI-A-001 Access to Courts/Access to Legal Materials
(Ref. 7/1/2009 BJG III-009, ACA CJS 1-6A-01, 1-6A-02, 1-6A-03, Department Regulation OP-C-10)

Written policy, procedure, and practice ensure the right of offenders to have access to courts. This includes reasonable access to legal Ref. materials or access to legal or paralegal assistance. Illiterate offenders shall be provided the assistance of a fellow offender or be furnished adequate assistance from the facility staff or other persons who have a legitimate connection with the legal issues being pursued. If an offender’s requirements in this area are significant and complex, exceeding the capability of the local facility to meaningfully provide assistance, then the offender shall be transferred to the DPS&C.

Comment: None
Documentation: Facility log.

VI-A-002 Access to Counsel
(Ref. 7/1/2009 BJG III-010, ACA CJS 1-6A-02, Department Regulation OP-C-10)

Written policy, procedure, and practice ensure offenders’ confidential access to counsel. Such contact includes, but is not limited to telephone communications, uncensored correspondence and visits.

Comment: None
Protocol: Written policy and procedure.
Documentation: Facility log. Record of attorney interviews.

VI-A-003 Protection from Abuse
(Ref. 7/1/2009 BJG III-014, ACA CJS 1-6A-06)
Written policy, procedure, and practice protect offenders from personal abuse, corporal punishment, personal injury, disease, property damage, or harassment.

Comment: None  
Documentation: Facility log. Incident reports. Staff training records.

B. FAIR TREATMENT OF OFFENDERS

VI-B-001 Discrimination  
(Ref. 7/1/2009 BJG III-011, ACA CJS 1-6B-02)

Written policy, procedure, and practice provide that program access and administrative decisions are made without regard to offenders' race, religion, national origin, gender, sexual orientation, or disability.

Comment: None  
Protocol: Written policy and procedure.  
Documentation: Facility records. Activity logs.

VI-B-002 Grievance Process (MANDATORY – ANNUAL REVIEW)  
(Ref. 7/1/2009 BJG III-015, ACA CJS 1-4C-01, 1-2A-16, 1-6B-01, Department Regulation OP-C-13)

Offenders have reasonable access to a grievance remedy procedure that includes at least two levels of review if necessary. The grievance remedy procedure shall be an administrative means through which an offender may seek formal review of a complaint which relates to any aspect of his imprisonment if less formal procedures have not resolved the matter. Such complaints and grievances include, but are not limited to, actions pertaining to conditions of confinement, personal injuries, medical complaints, time computations, the classification process, or challenges to rules, regulations, or policies. Through this procedure, offenders shall receive reasonable responses within a specified time period and where appropriate, meaningful remedies.

Comment: None  
Documentation: Grievances. Remedy response to offender.

PART VII. ADMINISTRATION AND MANAGEMENT

A. RECRUITMENT, RETENTION, AND PROMOTION
VII-A-001  Training and Staff Development
(Ref. 7/1/2009 BJG I-009, ACA CJS 1-1A-01, 1-1C-01, 1-1C-07, 1-4C-13, 1-4D-05, 1-4D-14, 1-7B-02, 1-7B-04, Department Regulation AM-F-22)

The facility conducts or participates in a training program which includes orientation for all new employees (appropriate to their job) prior to assuming a position or post. Such training must include:

1. Security procedures;
2. Hostage procedures – including staff roles and safety;
3. Fire and emergency plan/procedures;
4. Suicide precaution and signs of suicide risks;
5. Use of force policies;
6. Offender rules and regulations;
7. CPR and first aid;
8. Requirements of the Prison Rape Elimination Act (PREA);
9. Employees whose duties are the care, custody and control of offenders must complete the Peace Officers Standards and Training (POST) Level 3 certification training program, which consists of the ACA core curriculum, within one year of employment.

Comment: Training plans should include requirements for in-service training in critical areas of operation, at least annually.
Protocol: Written policy and procedure.
Documentation: Less plans. Staff training records.

VII-A-002  Weapons Training
(Ref. ACA CJS 1-7B-06, Department Regulation OP-A-19)

All personnel authorized to use firearms and less-than-lethal weapons must demonstrate competency at least annually. Training includes decontamination procedures for individuals exposed to chemical agents.

Comment: None
Documentation: Personnel records. Training records.

B. FACILITY ADMINISTRATION

VII-B-001  Authority
(Ref. 7/1/2009 BJG I-001)

There is a statute or constitutional provision authorizing the establishment of the local jail facility or its parent agency.
VII-B-002 Legal Assistance for Staff
(Ref. 7/1/2009 BJG I-004)

Written policy, procedure, and practice specify the circumstances and methods for the facility administrator and other staff to obtain legal assistance as needed in the performance of their duties.

Comment: None

Protocol: Written policy and procedure.
Documentation: Personnel or training records.

VII-B-003 Independent Financial Audit (REVISED)
(Ref. 7/1/2009 BJG I-005, La R.S. 24:513)

Written policy, procedure, and practice provide for an independent financial audit of the facility. This audit is conducted annually or as stipulated by statute or regulation, not to exceed three years.

Comment: None

Protocol: Written policy and procedure.
Documentation: Independent financial audit report.

VII-B-004 Facility Insurance (REVISED)
(Ref. 7/1/2009 BJG I-006)

Written policy, procedure, and practice provide for institutional insurance coverage, including at a minimum: worker’s compensation, civil liability for employees, liability for official vehicles, and either a commercial crime/employee theft insurance policy, or public employee blanket bond.

Comment: None

Protocol: Written policy and procedure.
Documentation: Insurance policy.

VII-B-005 Management of Offender Personal Funds (REVISED)
(Ref. 7/1/2009 BJG I-007, ACA CJS 1-7D-03, ACA 5-1B-4044, and 5-1B-4045; La. R.S. 15:874)

Written policies and procedures shall govern the management of offender personal funds held in trust by the facility. The policies and procedures shall include:
Specific guidelines and controls for collecting, safeguarding, and disbursing offender personal funds;
• Require offenders be provided receipts for all financial transactions;
• Comply with general accounting procedures and state law; and
• Establish a system of checks and balances.

Any interest earned on monies other than operating funds accrues to the benefit of the offenders.

Comment: None.
Protocol: Written policy and procedure.
Documentation: Offender records.

VII-B-006 Disposition of an Offender’s Account upon Death (NEW)
(Ref. ACA CJS 1-7D-03; La R.S. 15:874, La. R.S. 15:866.2 and 9:151 through 9:156; Department Regulation AM-C-2)

The facility shall complete its fiduciary duty to ensure all of the deceased offender’s funds due to the estate are properly accounted for, safeguarded, and disbursed.

Upon the death of an offender, facility staff shall do the following:

1. Complete the Disposition of Offender Funds upon Death (DPS&C Form AM-C-2-b) to determine the amount owed to the decedent’s estate and to determine what a claimant shall submit to receive the amount owed to the estate.
2. Check the offender’s Master Record and Visiting Lists to determine if there is a living spouse or other living heirs listed in the offender’s personal information. If so, facility staff shall attempt to notify the spouse or heirs of the amount owed to the estate, after all debts have been cleared, and the documentation required to receive the funds.
   a. If the amount owed to the estate is less than or equal to $2,500, provide the claimant a copy of the Claimant’s Request for Offender Funds Upon the Offender’s Death and Due to the Offender’s Estate (Form AM-C-2-a). The claimant must submit the completed and notarized form to receive the amount owed to the estate.
   b. If the amount owed to the estate is greater than $2,500, inform the claimant he/she must obtain a Judgement of Possession or Louisiana Small Succession Affidavit to receive the amount owed to the estate.
3. Pay all remaining debts of the decedent.
4. Release the funds to the claimant upon receipt of the required form/judgement/affidavit.
5. Forward subsequent monies received on behalf of the decedent to the claimant on file. Supporting documentation of funds received and forwarded should be maintained in the offender’s file.
6. Maintain the decedent’s funds within the facility’s bank account designated for offender personal funds until the decedent’s individual account balance has been depleted.

Upon the death of an ex-offender after release, but before all funds have been distributed to him, facility staff shall do the following:

a. Follow the above steps required for disposition of funds upon death.
b. Obtain a certified death certificate from the claimant.
c. Attach the certified death certificate to form AM-C-2-b.

Unclaimed funds of deceased offenders are not considered abandoned property as provided in La. R.S. 15:866.2. If attempts to notify a spouse or heirs have been unsuccessful for a period of five years, the money in the offender’s account should be submitted along with an unclaimed property report to the Department of Revenue and Taxation in compliance with La. R.S. 9:151 through 9:156.

Comment: None.
Protocols: None.
Process Indicators: None.

VII-B-007 Offender Records Security (NEW)
(Ref. ACA 5-ACI-1E-01; Department Regulation AM-G-1)5-1E-4095 and 5-ACI-1F-014100-1)

Written data security policy, procedure, and practice govern the collection, storage, retrieval, access, use, secure placement and preservation of records, and transmission of sensitive or confidential data contained in paper, physical, or electronic format.

Access to any information system by an offender in the custody or supervision of the Department is strictly prohibited. All personnel having access to the information systems are responsible for ensuring the security of the computer equipment and preventing unauthorized access.

Comment: An orderly and timely system for recording, maintaining, and using data about offenders increases the efficiency and effectiveness of the program and service delivery and the transfer of information to the courts and release authorities.
Protocols: Written policy and procedure. Case record management process.

VII-B-008 Organization
(Ref. 7/1/2009 BJG I-015; ACA CJS 1-7D-01)

Written policies and procedures describe all facets of facility operation, maintenance, and administration, are reviewed annually and updated, as needed. New or revised policies and procedures are disseminated to staff. A file for each guideline shall be maintained with documentation (primarily written) to support compliance.

Comment: None
**Protocol:** Written policy and procedure. Index.

**Documentation:** Annual reviews. Dissemination to staff.

### VII-B-009 Annual Compliance Statement
(Ref. 7/1/2009 BJG I-016)

Written policy, procedure, and practice demonstrate that the facility shall submit an annual statement confirming continued compliance with the Basic Jail Guidelines to the appropriate DPS&C Regional BJG Team Leader. This statement, shall be submitted by January 31st each year, in writing and shall include:

1. A copy of the current Fire Marshal Report;
2. A copy of the current Health Inspection Report;
3. Any proposed or projected expansion;
4. Any rehabilitative programs that are available; and
5. Summary of any reentry initiatives/programs implemented by the facility.

**Comment:** None.

**Protocol:** Written policy and procedure.

**Documentation:** Annual statement.

### VII-B-010 Monthly Reporting
(Ref. 7/1/2009 BJG III-007-1; Department Regulation AM-I-4)

Written policy, procedure, and practice ensure that any facility with DPS&C offenders report activities to the Chief of Operations on a monthly basis in accordance with Department Regulation AM-I-4. These reports shall be submitted on automated reporting forms provided by the DPS&C, no later than the 15th day of the month for the previous month’s activities. Automated reporting shall be completed, by the appropriate DPS&C Regional BJG Team Leader, no later than the 20th day of the month for the previous month’s activities.

**Comment:** All facilities that house DPS&C offenders are required to report on a monthly basis. Refer to Department Regulation AM-I-4 for details on specific reporting requirements.

**Protocol:** Written policy and procedure.

**Documentation:** Monthly report.

### VII-V-011 Staff Meetings
(Ref. 7/1/2009 BJG I-003; ACA CJS 1-4D-02)

Written policy, procedure, and practice provide for regular meetings between the Sheriff, facility administrator, or designee and all department heads. There is formal documentation that such meetings are conducted at least monthly.

**Comment:** None.

**Protocol:** Written policy and procedure.

**Documentation:** Staff meeting minutes/notes.
VII-B-012 Proposed Expansion  
(Ref. 7/1/2009 BJG V-010)

Any planned or proposed expansions for transitional work program or jail facilities that house DPS&C offenders shall be submitted to the Secretary of the DPS&C and the Executive Director of the LSA for consideration and approval.

Comment: None.

C. REASONABLE ACCOMMODATION

VII-C-001 Facility Equipment/Reasonable Accommodation  
(Ref. ACA CJS 1-7E-01)

Reasonable accommodation is made to ensure that all parts of the facility that are accessible to the public are accessible and usable by staff and visitors with disabilities.

Comment: None