Department of Public Safety & Corrections State of Consistant



JOHN BEL EDWARDS
GOVERNOR



JAMES M. LE BLANC SECRETARY

MEMORANDUM

TO: The Honorable Michael Tregre

Shert of St. John the Baptist Parish

FROM: James M. Le Blanc

Secretary

DATE: November 22, 2021

RE: "Basic Jail Guidelines" Monitoring Report

I am happy to advise that pursuant to the attached monitoring report concerning the Sherman Walker Correctional Center (St. John Parish Jail), I am recertifying this facility in compliance with the "Basic Jail Guidelines" with annual monitoring. We'd also like to encourage full compliance with BJG II-A-018 "Offender Drug Testing" and III-A-001 "Rules and Discipline".

Congratulations to you and your staff for this accomplishment and thank you for the hard work and dedication that are necessary to achieve this goal.

JML/mls

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Gordon Jeffcoat, Warden, Sherman Walker Correctional Center Seth Smith, Chief of Operations Kirt Guerin, Warden Aaron Hooper, BJG Team Leader



Department of Public Safety and Corrections

By the authority vested in me, under Chapter 9, Title 36 of the Louisiana Revised Statutes, J. James M. Le Blanc, Secretary, do hereby recognize

Sherman Walker Correctional Center – St. John the Baptist Parish
in acknowledgement of

Continued Compliance with the Basic Jail Guidelines Process

Therefore, I have hereunto set my hand and caused to be affixed the seal of the Department of Public Safety and Corrections, at the City of Baton Rouge,

this 22nd day of November in the year of our Lord 2021





07/28/20

BJG RECERTIFICATION REPORT

FACILITY NAME:

St. John Parish Jail

BJG MONITORS:

Aaron Hooper, BJG Team Leader

Jason Linzy, BJG Team Member

FACILITY STAFF:

Gordon Jeffcoat, Warden

Anthony Giovingo, Assist Warden

BJG INSPECTION DATE:

12/10/2020

PREVIOUS BJG INSPECTION DATE: 04/17/2019

0//17/2010

OPERATIONAL CAPACITY:

320

COUNT ON DAY OF VISIT:

84

Please see attached Excel Spreadsheet for each area reviewed for BJG compliance.

CONCERNS OR ISSUES FROM THE PREVIOUS BJG MONITORING INSPECTION:

	# MALE	# FEMALE	TOTAL
Number of DOC Offenders	26	0	26
Number of Local Offenders	55	3	58
Number of Out of State Offenders	0	0	0
Number of Federal Offenders	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	81	3	84

Number of DOC Offenders that are:

Single Bunked

-	
Double Bunked	26
Triple Bunked	0
Total	26
Number of DOC Offenders that are in r	estricted housing:
Single Bunked	0
Double Bunked	0
Triple Bunked	Ō

Assaults (Please list monthly since the previous BJG monitoring visit.)

Month/Year	Off/Off	Off/Off w/sig inj	Offender/Staff	Off/Staff w/sig inj
April 2019	4	0	0	0
May 2019	3	0	0	0
June 2019	4	0	0	0
July 2019	5	0	0	0
August 2019	4	0	0	0
September 2019	3	0	0	0
October 2019	1	0	0	0
November2019	3	0	0	0
December 2019	1	0	0	0
January 2020	0	0	0	0
February 2020	2	0	0	0
March 2020	6		0	0
April 2020	5	0	0	0
May 2020	3	0	0	0
June 2020	4	0	0	0
July 2020	2	1	0	0
August 2020	1	1	0	0
September 2020	0	1	0	0
October 2020	1	0	0	0
November 2020	1	0	0	0

Seizure Findings (Please list monthly since the previous BJG monitoring visit.)

Month/Year	Illicit	Alcohol	Weapon	Cell Phone	Other
	Substance				
April 2019	0	0	0	0	0
May 2019	0	0	0	0	0
June 2019	0	0	0	0	0
July 2019	0	0	0	0	0
August 2019	1	0	0	0	0
September 2019	0	0	0	0	0
October 2019	0	0	0	0	0
November2019	1	0	0	0	0
December 2019	0	0	0	0	0
January 2020	0	0	0	0	0
February 2020	0	0	0	0	0
March 2020	0	0	0	0	0
April 2020	Q	0	0	0	0
May 2020	0	0	0	0	0
June 2020	0	0	0	0	0
July 2020	0	0	0	0	0
August 2020	0	0	0	0	0
September 2020	0	0	0	0	0
October 2020	0	0	0	0	0
November 2020	0	0	0	0	Ō

GENERAL APPEARANCE/CLEANLINESS/COMMENTS OF THE FACILITY:

Living Area: Overall the living areas are found to be clean, organized, and odor free.

- Dorms Dorms areas were clean. Offender property was stored in the living area
- Cell Block The cell blocks were clean and odor free.

Culinary/Dining: The tools and sharps objects are controlled on an inventoried locked shadow board. Sample meal food trays are labeled and stored for at least the last five meals served. Cooler and freezer areas are found in good order with temperature logs checks documented. Offenders working in the kitchen area had gloves and hair nets on.

Bathrooms: Clean and in order. Bathrooms contained soap and paper towels.

Yard Areas: Yard and recreation areas provided three time per week if weather was permitting.

Maintenance: Facility has on staff maintenance personal daily. All maintenance tools are on inventory and checked daily.

COUNTS:

- How many formal counts are conducted each shift? There are three formal counts. One at morning shift change, one at noon, and one evening shift change.
- How many counts are conducted each day? There are five counts conducted daily.

Stick outs are counts that are conducted in areas other than housing units, such as food services and other areas of normally authorized locations. When conducting and submitting the counts, employees are to actually see the offender before turning in theses counts.

- How does the facility accomplish this? Stick out counts are called into the facility
- Does this process insure accountability and safe/secure operation of the facility? Yes

CLASSIFICATION SYSTEM:

Does the facility have any trustees that work outside the secure perimeter? Yes If yes,

Review of arrest history, review of prior job and custody change. The classification process is suggested by administration and signed off by Warden or his designee

Does their classification process meet DPS&C, Corrections Services' criteria? Yes

OFFENDER DRUG TESTING: (Please list monthly since the previous BJG monitoring visit.)

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
April 2019	8	75	11%	0
May 2019	16	83	19%	0
June 2019	10	99	10%	0
July 2019	13	77	16%	0
August 2019	13	81	16%	2 THC
September 2019	9	74	12%	0
October 2019	10	87	11%	0
November2019	9	76	11%	0
December 2019	9	75	12%	0
January 2020	6	63	9%	0
February 2020	5	65	7%	0

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March 2020	7	70	10%	0
April 2020	3	59	5%	0
May 2020	0	60	0%	0
June 2020	2	52	3%	0
July 2020	1	46	2%	0
August 2020	0	41	0%	0
September 2020	0	37	13%	0
October 2020	0	30	3%	0
November 2020	0	28	3%	0

BJG AUTOMATED MONTHLY REPORTING REVIEW:

Has the facility been inputting the correct info timely?

Yes

Does the reported info suggest any issues of concern or improvement? No

OFFENDER PROGRAMS:

GED Program

Number of GED Slots	8
Number of Participants	0
YTD Number of Completions	0

LIST ALL CERTIFIED TREATMENT PROGRAMS: (Attach Form B-04-003-B)

GED

LIST ALL OTHER OFFENDER PROGRAMS:

Religious Services

PREA COMPLIANCE:

- Is this facility required to be PREA compliant due to contract language? νο
- Is this facility PREA compliant? No

If yes, date compliance received:

• If this facility is required to be PREA compliant due to contract language, and has not done so, what is their plan of action for compliance? N/A

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Staff overall morale was good. Staff seem to be working together towards common goals. Administration has grown in their role on general operations and supervision

OFFENDER COMMENTS/MORALE/QUALITY OF LIFE:

No offenders voiced any complaints during the walk through. Food portions were controlled and adequate.

RECOMMENDATION:

II-A-018 Offender Drug Testing- Non Compliant- There was 6 months where they did not test 5% of the DOC population

At this time, recertification with annual monitoring visits is recommended.



actility: St. John Parish Prison Date Conducted: 12-10-2020				
Honitors: Aaron Hooper, BJG Team Leader, Jason Linzy ,BJG Team Member				
BASIC JAIL GUIDELINES (BJG)				
PART I - SAFETY				
A. PROTECTION FROM INJURY AND ILLNESS References: ACA CJS 1-14-01, 1-14-02, 1-14-03, 1-14-04, 1-14-05, 1-1C-03, 1-				
44-03, 1-44-04	Findings	Response		
I-A-001 Safety/Sanitation/Inspections The facility compiles with all applicable laws and regulations of the State Sanitation	Compliant -			
Officer and the State Fire Marshal.				
The following inspections are implemented: •Weeldy sanitation inspections of all facility areas by a qualified departmental staff				
member.				
 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.				
Visual Inspection: completed inspection checklists and reports, documentation of				
corrective action, inspection reports I-A-002 Disposal of Materials	Compliant			
Osposal of liquid, solid, and hazardous material complies with applicable government regulations.				
Visual Inspection: trash disposal contract, completed inspection reports, include				
documentation that deficiencies were corrected I-A-003 Vermin and Pests	Compliant -The facility has pest control contracts and			
Vermin and pests are controlled. There is a written and implemented plan for the control of vermin and pests.	trash disposal contracts in place.			
Visual Inspection: past control contracts, trash disposal contracts, inspection reports				
I-A-904 Housekeeping	Compliant - Good policy in place to ensure daily			
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.	housekeeping duties are maintained.			
Provides for the disjointy destinates and solidation of the facility. Visual Inspection: inspection reports, completed forms, documentation of correction of				
Identified deficiencies I-A-00S Water Supply	Compliant			
The facility's potable water source and supply is certified at least annually by an	Component			
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.				
Visual Inspection: documentation of approval by DHH or local authority, plan for addressing deficiencies				
B. VEHICLE SAFETY References: Dept. Reg. C-03-003/OP-A-3	Findings	Response		
I-B-001 Offender Transport Escorted and unescorted absences of state offenders are governed by R.S. 15:811	Compliant			
and 833 and DPS&C Department Regulation No. C-03-003 "Escorted Absences."				
Visual Inspection: documentation of staff training, documentation of medical, funeral,	1			
atc. (outside tripe)				
C. EMERGENCY PREPAREDNESS/RESPONSE				
References: ACA C35 1-1C-01, 1-1C-02, 1-1C-03, 1-1C-04, 1-1C-06, 1-1C-07, 1-7E-01, Dept. Regs. A-04-002/P8-D-3, C-02-001/OP-A-5, C-02-010/OP-B-3, C-	Findings	Response		
05-001/AM-I-4 I-C-001 Emergency Plan	Compliant- An emergency plan is in place, drills are			
There is a written plan, submitted to the Secretary of DPS&C, that specify the	being conducted and legged to reflect that training is			
procedures to be followed in situations that threaten facility security. Such situations include but are not limited to riots, hunger strikes, disturbances, taking of	taking place. Evacuation plans are posted throughout			
hostages, and natural or man-made disasters. These plans are made available to	the detention center in the event of fire or a major emergency.			
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 liness				
or injury and assaults or other acts of violence. Such procedures include the				
reporting of these incidents to the OPS&C, OAS, telephone 800-803-8748 during normal business hours or the control center at EHCC, telephone 800-842-4399 after				
hours, when they involve OPS&C offenders. In addition, the facility shall follow the incident reporting precentures as outlined in Dept. Reg. C-05-001/AM-1-4, "Activity				
Reports, UORs, "Category A, B and C.				
Visual Inspection: training records, facility logs, documentation of approval of plan,				
documentation of annual review, documentation of staff receipt, training on the plan				

Facility - Data MJC Compitation



	Findings	Response
I-C-002 Immediate Release of Offenders There is a means for the immediate release of immates from locked areas in case of emergency and there are provisions for a backup system. The facility has exist 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 fire or other emergency.	Compliant -All exits are clearly marked and free from obstruction. Evacuation routes are clearly posted and easily understood throughout the facility. Policy is in place for the immediate release of offenders from all areas.	
Visual Immension: Sedility records/Boss 1-C-003 Fire Sefety/Code Conformance 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 - State	Compliant -Facility perticipates in annual inspections by State Fire Marshall and provides corrective action for deficiencies	Do to Covid 19 State Fire Marshall did not go out and inspect the facility
erunivationcies Visual Impaction: documentation of fire alarm and detection system maintenance and heating, plans for addressing deficiencies		
IC-004 Pacility Furnishings Facility furnishings meet fire-safety-performance requirements, Viewal Inspection: Seadifications for all furnishings.	Compliant - File documentation indicates all furnishings meet fire safety requirements.	
I-C-003 Plammable, Caustic and Toxic Materials Written policy, procedure and practice govern the control and use of all flammable, toxic and caustic materials.	Compliant -Policy in place and MSDS on site.	
Visual Inspection: Staff training records, offender training records, internal inspection reports. Decumentation of incidents that involved FTC materials. Inventories.		
I-C-006. Operational Capacity 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 fectures to offenders and square footage. The operational capacity will be the lower of these two figures.	Compliant	

PART II - SECURITY		
A. PROTECTION FROM HARM		
References: ACA CJS 1-2A-01, 1-2A-04, 1-2A-05, 1-2A-06, 1-2A-08, 1-2A-11, 1-		
2A-13, 1-2A-14, 1-2A-16, 1-2A-17, 1-2A-19, 1-2A-20, Dept. Regs. A-02-008/AM-	Findings	Responsé
F-47, B-02-001/IS-B-1, C-02-007/OP-C-3		
II-A-001 Control	Compilant -The facility main control provided security,	
There is 24-hour monitoring and coordinating of the facility's security, life safety,	communications and monitoring of the fire safety	
and communications systems. Visual Inspection: facility records/logs, maintenance records, records of staff	system.	
deployment		
II-A-002 Secure Perimeter	Compliant	
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	ľ	
denied without proper authorization.		
Visual Inspection: documentation of receipt of job description by staff, documentation		
of armual review and updating, photos of parimeter controls		
II-A-003 Sufficient Staff	Compliant	
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		
renect good correctional practice. Surnicient start, 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 BJG.		
Visual Inspection: records of staff deployment, facility loge, decumentation of annual	1	
review of staffing analysis and plan		
II-A-004 Female Offenders and Female Staff	Compliant -Female staff work in female offender	
When a female offender is housed in a facility, at least one female staff member is	dorms. When male staff make rounds in the female	
on duty at all times.	dorms, they must have a female staff member with	
Visual Inspection: records of staff deployment, facility logs	44	
II-A-005 No Offender Control Over Others	Compliant	
No offender or group of offenders is given control, or allowed to exert authority over		
other offenders.		
Vigual Inspection; written policy and procedure II-A-006 Staff Log	Compliant -Logs are placed in all areas of the facility	10-3
Correctional staff maintain a permanent log and prepares shift reports that record	and contain required information. Facility forms are	
routine information, emergency situations and unusual incidents. The facility shall	also completed for notification of incidents to	
maintain written records or loos which continuously document the following	administration.	
information:	administration.	
I. 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 recording receivements to DPSAC Visual Inspection: copies of log book, records of staff deployment		
Amount traductross: exhans on ted noted tarrates on terms or terms and tarbush transfer.	L	



	Findings	Response
II-A-007 Counts	Compliant - Offenders are counted five times daily and	
The facility has a system for physically counting offenders. At least one formal	logged when offenders are out on a trip or work detail.	
count is conducted for each shift, with no less than 3 counts daily. The system	Counts are performed at the beginning and end of	
includes strict accountability for offenders assigned to work and other approved	each shift and during noon meal.	
temporary absences	Bach shirt and ourning book meat.	
Visual Inspection: completed forms, facility records/logs.		
II-A-008 Offender Population Management System	Compliant - All required documentation is maintained	
There is an offender population management process that includes records on the	on offenders.	
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		- Maria - Mari
any neentry transition envelops shall be transferred with the offender at such time		
the offender is transferred to another local or DPS&C facility.		
1. Master prison form;		
Bill of Information and Court Minutes OR Uniform Commitment Order;		
3. One photograph;		
 Reports of disciplinary actions, grievances, incidents, or crimes committed while in 		
custody;		
Records of program participation, work assignments, classification actions;		
Any government issued identification card (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).		
In addition to the maintenance of the above information, the following shall be	Committees	
	Compilant	
collected and forwarded to the DPS&C Pre-Class Coordinator either by fax to 725-		
342-3759 or email to DOC-HQ_Supplemental@la.gov.		
Master prison form; ASSET Prison form;		
2. Fingerprints: one FBI print card from AFIS;		
3. One photograph;		
4. Bill of Information and Court Minutes or Uniform Commitment Order for each		
conviction (for probation violators both the original sentencing minutes and the		
revocation minutes are required);		
S. Jail credit letter;		
6. One Inventory Arknowledoment Form (cash and omnerly receipts). Visual Inspections, completed forms, reports, offender record		1
II-A-009 Reception - Legal Commitment and Medical Service	Compliant	
Prior to accepting custody of an offender, staff determine that the offender is legally	Positionarie	
committed to the facility, and that the offender is not in need of immediate medical		
attention.		
Visual Inspection: Completed Admission forms, facility logs.		
II-A-010 Admissions	Compliant	· · · · · · · · · · · · · · · · · · ·
Admission processes for a newly admitted offender include, but are not limited to:	Company	
«Searching of the offender and personal property;		
olinventorying 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;	1	
 Separating from the general public; Providing a health screening to assess and identify any health and safety month; 	1	
Providing information about access to health services, copay requirements and		
submitting orievances.		
Sometime Australings		
		Į.
Visual Inspection: Intaks and admission forms, screening forms, inventory form,	1	
receipt form.		
II-A-011 Out of State Offenders	Compliant - Faculty doesn't house out of state	1
The names of any out of state offender (federal or state) to be housed at a local jail	offenders.	
or privately managed facility shall be submitted to the Chief of Operations prior to		
the offender(s) entering the State of LA. No such offender shall be housed if the		
offender would be classified as maximum custody under the LA 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 LA. 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.		
Visual Inspection: offender record, submittal to chief of operations of out-of-state offenders to be housed at the facility, release/transfer documentation		
remenues en ma nesmoid at this facility. Intellage itransfor declinate/2008		



	Findings	Response
II-A-012 Classification System 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, special problems and needs, and behavior. All offenders are classified using an objective classification process that at a minimum: I dentities the appropriate level of custody for each offender I dentities appropriate housing assignment I dentities the offender's interest and eligibility to participate in available programs	Compliant -A classification system is in place with written policy. Trustee status is determined by nature of offenders crime, length of sentence, amount of ball sentenced.	Kayure
Visual Impaction: offender housing records, offender classification records		
III-A-0.3 Prohibition on Youthful Offenders of adult facilities only under the conditions established by law. If juveniles are committed to the facilities only under the 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. OAS shall be notified of offenders who are under the age of 18 that are sentenced to the DPSAC as an adult for transfer to the appropriate institution.	Compliant	
II-A-014 Separation in Classification	Compliant	
Make and female offenders must be housed in separate rooms/cells with reasonable sight and sound separation. Visual Expections offender housing records, offender classification records, diagrams of facility showing make/female bousing areas		
II-A-016 Photo Identification The facility shall provide each DPS&C offender with photo identification, which the offender shall carry/webs on their person at all times. Visual Impection: Offender Identification card/wristband.	Compliant- Upon admission, all offenders receive an institutional ID arm band.	
II-A-017 Drug Free Workplace 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. Visual Inspection: drug testing lab fee fulls for drug testing of facility employees (Including pre-employment, post accident, rassonable suspicion/probable cause,	Compilant	
random).	A	
11-A-018 Offender Drug Teeting 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 DESAC offender, population shall be drug tested on a monthly basis. Visual Trapestion Facility Fog, documentation of alcohol-drug testing of offenders.	Non Compliant- There was 6 months where they did no	
11-A-019 Offender Transfers All transfers of DPS&C offenders to other than DPS&C facilities shall be reported to the CAS, at least one day prior to all scheduled transfers and within one business day for all non-scheduled transfers. The DDC offender transfer form shall be submitted by the transfering facility to OAS at least one day prior to the transfer cocurring by fax to 225-342-439 or by email to LocalballTranfers@ba.gov. Offenders should not be transferred to 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. Visual Enspection: facilities	Compliant	
II-A-020 Frequency of Cell Checks	Compliant	
Written policy, procedure, and practice provide secure, safe housing by establishing the frequency of cell checks in all celliblock areas not to exceed four (4) hours. Staff will document these checks in their staff loos. Visual Enspections Facility loos, documentation of frequency of cell checks.		
B. USE OF PHYSICAL FORCE		
References: ACA C15 1-28-01, 1-28-02, 1-28-03, 1-28-05, 1-28-05, 1-28-06, 1-40-12, Dept. Reps. B-05-001 HC-06/18-D-HCP33, HC-29/15-D-HCP40, C-01-009/0P-A-19, C-02-006/0P-A-18, C-03-003/0P-A-3	Findings	Response
II-B-001 Use of Force 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 consistences.	Compliant - Facility maintains a strict policy on Use of Force. Training is conducted on an annual basis and reports are clear and concise.	
II-B-002 Use of Restraints	Compliant -Policy and procedures are in place to	
Written policy, procedure, and practice provide that mechanical restraints, such as handcuffs and leg imps, 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;	Indicate when and where restraints are to be utilized. Documentation of this practice was demonstrated in the file.	
Length of time restraints are to be applied; Documentation of efforts for less restrictive treatment alternatives; An affer-locident review. Visual Enspection: facility records, logs		

Facility - Dais

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	Findings	Response
II-8-002-1 Use of Restraints for Pregnant Offenders	Compliant	
Written policy, procedure, and practice complies with the following requirements:		
Restraints During Pregnancy-Related Transportation		
 Restraints shall not be used on a pregnant offender (1) during any pregnancy 	1	
related medical distress, (2) while she is being transported to a medical facility or	4	
LCTW unless there are compelling grounds to believe that the offender presents		
either of the following:		
 a) An immediate and serious threat of physical harm to herself, staff, or others; 		
b) A substantial flight risk and the offender cannot be reasonable contained by		
other means.		
•If restraints are utilized during transportation, the offender shall not be cuffed		
behind the back or restrained using waist restraints.		
Visual Inspection: facility records, logs		
II-8-003 Use of Firearms	Compliant	,
The use of firearms compiles 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 	1	
approved by the facility administrator.		
Appropriate equipment is provided to facilitate safe unloading and loading of		
finance. Visual Inspection: training records, safety regulation and inspection reports, photos o	1	
equipment used for unloading and releading		
II-B-004 Written Reports	Compliant	
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		
eUse of force to control offenders		
Offender(s) remaining in restraints at the end of the shift		
•Emergency distribution of security equipment	t	
Visual Inspection: completed reports, facility records and locs		
C. CONTRABAND/SEARCHES	1	
References: ACA CIS 1-2C-01, 1-2C-04, Dept. Reg. C-02-003/OP-A-8	Findings	Response
II-C-001 Procedures for Searches	Compliant - Clear and concise policy, All offenders are	
Written policy, procedure and practice guide searches of facilities and offenders to	searched upon return to the facility.	
control contraband. Manual or instrument inspection of body cavities is conducted	Section 1997 Secti	
only when there is reasonable belief that the offender is concealing contraband and	1	
when authorized by the facility administrator or designee. Health care personnel]	
will conduct manual or instrument inspections in private.		
Visual Inspections observation, facility records and logs, offender and staff interviews		
A ACCOUNT TO LITTLE TO A COUNTY OF THE PARTY	1	
D. ACCESS TO KEYS, TOOLS, UTENSILS References: ACA CIS 1-2D-01		
References: ACA CIS 1-2D-01 II-D-001 Key, Tool, and Utensii Control	Findings	Response
III-D-MUL BAY, TOOL SEG URRESU CONTROL		
	Compliant -All keys, tools and utensils were accounted	
Keys, tools, culinary equipment and medical/dental instruments and supplies	for & maintained in a secure area. All Items of this sort	
Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written	for & maintained in a secure area. All Items of this sort are logged in and out and accounted for on a daily	
Kays, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are investoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary	for & maintained in a secure area. All Items of this sort	
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Keys, tools, cufinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER A. OFFENDER DISCIPLINE References: ACA CSS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. 8	for & maintained in a secure area. All items of this sort are logged in and out and accounted for on a delly basis.	Response
Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER A. OFFENDER DISCEPLINE References: ACA CIS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. 8 06-003-005-53	for & maintained in a secure area. All items of this sort are logged in and out and accounted for on a daily basis. Findings	Response
Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER A. OFFENDER DISCIPLINE References: ACA CIS 1-2A-15, 1-3A-01, 1-5C-02, 1-5C-03, 1-5C-04, Dept. Rag. 8 05-00-1/08-CIS	for & maintained in a secure area. All items of this sort are logged in and out and accounted for on a daily basis. Findings Compilant - Facility follows proper procedures to	Response
Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Inspection: documentation of perpetual inventories PART III - ORDER A. OFFENDER DISCIPLINE References: ACA CIS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. 8, 05-003, 103-C-3. III-A-001 Rules and Disctpline Prior to being placed in the general population, each offender is provided with an	for & maintained in a secure area. All items of this sort are logged in and out and accounted for on a daily basis. Findings Compliant - Facility follows proper procedures to notify DPS&C of rule violators who need to be	Response
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Keys, tools, culinary equipment and medical/dental instruments and supplies (syringes, needles and other sharps) are inventoried and use is controlled. Written policy, procedure and practice govern the control and use of keys, tools, culinary equipment, and medical/dental instruments and supplies. Visual Impaction: documentation of perpetual inventories PART III - ORDER A. OFFENDER DISCIPLINE References: ACA CIS 1-2A-15, 1-3A-01, 1-6C-02, 1-6C-03, 1-6C-04, Dept. Reg. of the Annia Allonics. IIII -A-031 Rules and Discipline 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. The facility shall follow and provide the DPS&C "Disciplinary Rules and Procedures for Adult Offenders", to the offender population. of the Sheriff or local jail administrator believes that a loss of good time is	for & maintained in a secure area. All items of this sort are logged in and out and accounted for on a daily basis. Findings Compliant - Facility follows proper procedures to notify DPS&C of rule violators who need to be	Response
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Facility - Date

BJG Compliano



PART IV - CARE		
A. FOOD SERVICES		
References: ACA CJA 1-4A-01, 1-4A-02, 1-4A-04,1-4A-06, Dept. Rog. C-06- 001/IS-C-1	Findings	Response
IV-A-001 Food Storage Facilities There are sankary facilities for the storage of all foods that comply with applicable state and/or federal (juidelines. Visual Trapportion: DMN inspection reports. Inhamal inspection reports	Compliant - Daily inspections are conducted in the Food Service area to ensure storage areas are maintained in a safe manner. All areas were found to have compliant temperature less.	
TV-A-002 Food Service Facilities Toilet and hand basin facilities are available to food service personnel in the food preparation area. Visual Impaction: OHN Inspection reports, photos	Compilant	
TV-A-03 Food/ Dietary Allowances The facility's dietary allowances are reviewed at least annually by a qualified mutritionist or dieticlain 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 delay 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 mutritional characteristics and caloric adequacy. The facility shall provide a tray/plate and utensils) for each hot meal.	Compliant	
documentation of at least annual project and quarterly menu evaluations. IV-A-004 Records of Meals Served Written policy, procedure, and practice require that accurate records are maintained of all masks served. Wisself Impections, decility look.	Compilant -Sample trays kept and labeled for at least 3 days.	1.000
IV-A-03 Denial of Food as Discipline Prohibited Written policy, procedure, and practice preclude the denial of food as a disciplinary Impassure Institute Ins	Compliant	
IV-A-006 Food Service Menagement 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 an ample appendicularly to eat for each meal.	Compilant	
IV-A-007 Therapeartic/Special Dieta Therapeatic 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. Visual Impeciation: health records, diet records or forms, documentation of warden's	Compilant	
Important: Important: Important: Interest in tracers, also records or or own, economication of warrant is asserted of religious disk. IV-A-008 Health Protection for Pood Service. IV-A-008 Health 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, staff 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 tolet facilities. Visual Impaction: impaction respects, completed forms, documentation of daily monitoring for health and cleanliness.	Compliant - All offenders are screen prior to being assigned as a kitchen worker. Food Sarvice Staff conduct inspections on every shift to ensure proper hygiene. Signs are posted in the restroom facilities about proper handwashing techniques prior to returning to work.	



B. HYGIENE		
References: ACA CJS 1-48-01, 1-48-02, 1-48-03, 1-48-04, Dept. Reg. B-06- 001/HC-34/IS-C-3	Findings	Response
IV-8-001 Plumbing Fixtures - Tollets and Washbasins	Compliant - Each pod/dorm and calls have access to	
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.	hot/cold water at washbasins and tollet facilities.	
Visual Inspection: maintenance records or reports, inspections, documentation of pariodic magazinems of water temperature, offender grievences		
IV-8-002 Plumbing Fixtures - Showers	Compliant	10.000
Offenders, including those in medical housing units or infirmaties, 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.		
Visual Inspection: maintanance records or reports, inspections	Andrew Heave	
1V-B-003 Cloching 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.	Compilant	
Visual Inspection: documentation of clothing issue, documentation of cleaning and		
storage IV-B-004 Hyglene/Bedding Issue	Compliant -Bedding and linen cleaned daily and proper	
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.	documentation kept.	
Visual Inspection: documentation of issue and exchange IV-8-005 Personal Hygiene	Compliant	
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, tollet paper, toothbrush, toothpaste and shaving equipment.		
Visual Inspection: documentation that items are provided, list of items evaliable		
C. CONTINUUM OF HEALTH CARE SERVICES		
References: ACA CIS 1-2A-14, 1-4C-01, 1-4C-03, 1-4C-04, 1-4C-06, 1-4C-07, 1-		
4C-08, 1-4C-09, 1-4C-10, 1-4C-13, 1-6C-15, 1-6D-01, 1-4D-03, 1-4D-04, 1-4D-06, Dept. Regs. 8-06-001/IS-D-2, HC-01/IS-D-HP13, HC-02/IS-D-HCP14, HC-		
05/15-D-HCP20, HC-06A/15-D-HCP41, HC-06B/15-D-HCP42, HC-06C/15-D-	Findings	Response
HCP46, HC-08/35-D-HCP33, HC-09A/35-D-HCP22, HC-11/35-D-HCP34, HC-13/35 D-HCP16, HC-17/35-D-HCP7, HC-38/35-D-HCP30, B-06-003/AM-C-4, C-02- 008/0P-C-9, C-03-001/AM-1-4		
IV-C-001 Access to Care/Clinical Services	Compliant -Offenders receive all necessary information	
At the time of admission/intake, all offenders are informed about procedures to	on accessing health care services, and co-Pay	
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. When the health authority is other than a physician, final clinical	Requirement. Health care services are contracted through Correct Health and Provides a wide range of services.	
judgments rest with a single, designated, responsible physician. «Written policy, procedure, and practice provide for the delivery of health care services, including medical, 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. Speciality non primary relinited considers are remembed to PGAC The interest shall be cultivated by the ofin accordance with 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 Dept. Reg. 8-06-001. HC-02/JS-D-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 breatment.		
Visual Inspection: Documentation that offenders are informed about health care and the grievance system, a health record, medical copeyment fee schedule.		
Visual Inspection: Decumentation that offenders are informed about health care and the greenoe system, a health record, medical copayment fee schedule. IV-C-002 Adequate Equipment and Supplies Adequate equipment and supplies for medical services are provided as determined by the health care authority and are in working order. Visual Inspection: Photos	Compliant	



	Findings	Response
IV-C-003 Provision of Treatment 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-sight entergency treatment of an offender.)	Compliant	
Visual Enspection: documentation of health authority designation, contract, billing records, sick call request form, a health record, clinical provider achedules, current gradentials/licensurs IV-C-004 Parsonnel Qualifications/Cradentials	****	
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 add/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.	Compliant	
Visual Trapection: health records, completed medication administration fores, personnel moords, copies of current credentials or Boarsare, documentation of compilance with standing orders, health record antiss, staff training records		
IV-C-008 24 Hour Care Written policy, procedure, and practice ensure that offenders have access to 24- hour emergency medical, dental, and mental 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 focal private hospital, on-call qualified health care personnel (see IV-C-003), or on-duty qualified health care personnel. Decisions reparding 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.	[
Visual Inspection: designated facility, provider lists, transportation logs TV-C-005 Health Screens	Compliant	
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 from (IVC-006-A) provided by DPS&C. The purpose of the health screening is to protect newly admitted offenders who pase a health safety threat to thenselves 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. Cirvervation of the followind: a. Appearance and behavior; b. Body deformaties 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 DS&C for appropriate care; e. Any physical impairment (hearing, vision, mobility) or other disability which would impedie the offender's access to programs or services. Offenders identified with such an impairment or disability shall be transferred to the DPS&C for further evaluation and determination of appropriate housing placement. [Reference 2008 Resolution Agreement: US OOJ and LA DPS&C.] 9. Current health insurance.		
IV-C-006-1 Pregnancy Management Written poky, procedure and practice require that all pregnant offenders have access to obstetrical services by a qualified provider. The local jail facility shall notify the Department's Medical Director, when a DPS&C offender is pregnant to ensure proper placement or if transfer to a DPS&C facility is	Compliant	
RECESSETY. Visual Impection: written policy and procedure, health record where pregnent offender received obstatrical services by a qualified provider, notification to DPS&C whom REEG. Affander is received.		



Disc. 607 Communicable Disease and Infantian Control Storage	Findings Committee Comment handth has excellent	Response
IV-C-007 Communicable Diseases and Infection Control Program 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 within 14 days of arrival at the facility. If there is documented evidence of TB 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	Compilant- Correct health has excellent policy/procedures in place for screening, surveillance, treatment and reporting of communicable/infectious diseases.	
must comply with applicable local, state and federal regulations. Visual Inspection: health records, clinic visit logs, documentation of wasts pic up		
and/or dearning logs IV-C-098 Annual TB Teating 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, tolephone 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 physician or mid-level evaluation, based on the reported positive signs or symptoms. Visual Engeptions: health records	Compliant -TB testing are given to offenders in booking and annually	
Visual Impaction: health records Visual Impaction: health records	Compilant	
IV-C-010 Pharmacourticals Written policy, procedure, and practice approved by the health authority provide for the proper management of pharmacouticals. Offenders are provided medication as prescribed. Visual Inspections health records, completed medication administration forms,	Compliant	
Inventories TV-C-011 First Aid Kits First, aid lists are available in areas of the facility as designated by the responsible health care authority and shall be immediately accessible to housing units.	Compilant - First Aid kits are available throughout the facility.	
Visual Impactions location of first aid kits within the facility IV-C-012 Access to Sick Call 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 personned 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: a Facilities with fewer than 100 offenders - 1 time per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 4 times per week; a Facilities with more than 300 offenders - 1 times per week; a Facilities with more than 300 offenders - 1 times per week; a Facilities with more than 300 offenders - 1 times per week; a Facilities with more than 300 offenders - 1 times per week; a Facilities with more than 300 offenders - 1 times per week; a Facilities with more than 300 offenders - 1 times per week; a Facilities with fewer than 100 offenders - 1 times per week; a Facilities with more than 300 offenders - 1 times per week; a Facilities with fewer than 100 offenders - 1 tim	Compliant -Sick call forms are available in all dorm areas. Once completed they are placed in the sick call box and health care staff is the only ones who retrieve them. The requests are triaged and scheduled for visits.	
IT—C-013 Infilmwary Care If infirmary care is provided onsite, it compiles with applicable state regulations and local licensing requirements. Provision include 24 hour emergency on-call consultation with a physician, dentist and mental health professional. Written policy, procedure and practice provide that any offender who is identified as requiring a medical, dental or mental health need for which care is not readily available from the local facility, shall be immediately transferred to OPS&C. It is particularly important that smaller facilities recognize the commitment of the OPS&C to accept into their custody any state offender whose condition is problematic. Vieual Inspections admission or impattent records, staffling schedule, completed form C-	Compliant	
05-004-8 IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, Compassionate Release) 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 Dept. Reg. to the DPS&C's Chief Nursing Officer via email to MedicalDirector@corrections.state.la.us or by fax to 225-342-7240.	Compliant	
Visual Inspection: health records, documentation of approval of DPS&C's Chief Hursing Officer. JW-C-0.14 Saleide Prevention and Intervention 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. 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 susualish in the inchestesser stein of the nonzero. Visual Inspection: health records, documentation of staff training, documentation of observation of satisfic wasterness.	Compliant	

Facility - Date

IJG Compilance



	Findings	Response
IV-C-015 Offender Deaths	Compliant - Facility has a policy in place for actions to	
Written policy, procedure and practice specify and govern the actions to be taken in	be taken in the event of an offender's death.	
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 1-C-001. In addition, a written report of all offender		
deaths shall be submitted to DPS&C on Form C-05-001-X (via email to		
catanotify@corrections.state.la.us or via fax to 225-342-3349).		
Visual Inspection: notification, reporting requirements, report to OPSEC		
IV-C-016 Notification	Compliant	
A visit with an immediate family member when the offender is admitted to an 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 Dept. Reg. C-02-008; If the offender's admission to the ICU or trauma center occurs between 8:00 pm		
and 4:00 am, 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		
Visual Inspection: notification records	<u></u>	
D. HEALTH SERVICES STAFF		
References: ACA CJS 1-4D-02, 1-40-04, 1-4D-05, 1-4D-07, 1-4D-08, 1-4D-09, 1-		
4D-10, 1-4D-17, 1-4D-18, Dept. Regs. B-06-001/HC-24/ISD-HCP44, HC-25/IS-D	Findings	Response
HCPS. HC-26/IS-D-HCP10. HC-33/AM-Q-5. IV-D-001 Health Care Quarterly Meetings	Compliant	*****
The health authority meets with the facility administrator at least quarterly.		
Visual Inspection: documentation of meetings		
IV-D-002 Research	Compliant	
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.		
Processing diet o not designant assumer.		
Visual Inspection: written policy and procedure		Anna A
IV-D-003 Health Care Personnel/Job Descriptions	Compliant - All Correct Health staff have specific job	7 27
Health care staff work in accordance with professional specific job descriptions	decryptions on file.	
approved by the health authority.		
Visual Inspection: job descriptions		
IV-D-004 Confidentiality of Health Information	Compliant- Only health care staff have access to an	
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	offender's medical record which is maintained in the health care office.	
preserve the health and safety of the specific offender, other offenders, volunteers,	hearth care office.	
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 for 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.		
Visual Impaction: health records, completed consent forms, completed refusal forms		
IV-D-005 Informed Consent	Compliant - When specific treatment is required an	
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	offender is advised of all options and treatment	
information consent of a parent, guardian or legal guardian applies when required	procedures and is then required to sign an informed consent or refusal form.	
by law. Offenders routinely have the right to refuse medical interventions. When	Comment of Fernance Country	
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.		
Visual Inspection: health records, completed consent forms, completed refusal forms IV-D-006 Emergency Response	Compliant - All Health care staff are trained in CPR	
Emergency medical care, including first aid and basic life support, is provided by all	Compacts - All Postul Card Stall Sig Usings Hi CPK	
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.		
LICILLY MOUNTS (PECUS) OF I POWERS OF STREET, AND BE THE THE THE STREET.		
[14] 19		
Visual Inspection: verification of training, records and cartificates IV-D-007 Internal Review/Quality Assurance	Compliant - Policy is in place for internal reviews upon	
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.		
Visual Inspection: evaluation of major risk extensorment events	X 0 70 F	1000



E. SEXUAL ASSAULT. References: ACA C75 1-4D-13, 1-4D-15, 1-4D-16, Dept. Rege. A-04-002/PS-D-3, C-01-022/0P-A-15	Findings	Response
ITV.E-001. Allegued and Substantiated Sexual Assaults Written policy, procedure and practice provide for the prevention, detection, response, reporting and investigation of alleged and substantiated sexual assaults. (PREA) Information provided to offenders about sexual abuse/assault includes: «Prevention/intervention; «Reporting sexual abuse/assault; «Treatment and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C more and counseling. When the occurrence/allegation of sexual assault or threat involves a DPS&C and the action of the action	Compliant	
Visual Inspection: documentation of reports to DPS&C, investigative reports		

PART V - OPFENDER PROGRAMS AND ACTIVITY A. GEFENDER OPPORTUNITIES FOR DEPTOYTHERT RESPONDER ACADES THAN DOCUMENT AND BOOKING PER T.	Finding	Restropte
Y-A-001 Volumbeers/Registration There is an official registration and identification system for volunteers.	Compliant	
Visual Englection: activity schedules, facility logs		
V-A-002 Voluntaer Services A current schedule of volunteer services is available to all offenders and is posted in appropriate areas of the facility.	Compliant	
Visual Inspections activity schedules, facility logs		
V-A-643 Programs and Servions 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 offender(s) for program placement; 2. Offender application to program; 3. Program sign-in sheets and/or attendance rosters; 4. Signed copy of CTPP credit forms; 5. Documentation for staff oversight if program is not administered and/or overseen by DPS&C staff.	Compilant	
Visual Impactions activity schedules, facility logs V-A-003-1, Educational Programming	Compliant	
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-eigible Post-Secondary Training Any planned or proposed programs for education in local fail facilities that house DPS&C offenders shall be submitted to the DPS&C Education Director.		
Visual Impection: activity schedules, facility logs		



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FUNDAMENTAL ACA COS 1-1C-02, 1-30-01, 1-50-01-1, 1-50-01-1, 1-50-01-1, 1-50-	े भीने पर	
03, 158-01-1, 1-98-01-2, 1-36-03, 1-96-03, 1-96-03, 1-96-00, 0-97, 8-98-03 (02/79-0-3), 8-98-03/13-0-1667, 8-98-03/13-0-1667, 8-98-03/13-0-1667, 8-98-03/13-0-1667, 8-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-1667, 8-98-03/13-0-8, 6-98-03/13-0-1667, 8-98-03/13-0-1667, 8-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-03/13-0-8, 6-98-08-08-08-08-08-08-08-08-08-08-08-08-08	Phidlings	Risportes
00 00 C-1 00 00 00 00 00 00 00 00 00 00 00 00 00		
V-B-001. Releasing Offenders Procedures for relating offenders from the facility include, but are not limited to, the following: «Return of personal property, to include any govt: Issued ID (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 reentry transition document	Compliant: Documentation reviewed that includes all of the required items. Facility provides a seven day supply of prescription medication.	
envelopes and all its contents. 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 iffness), along with a prescription for a thirty (30) day of medication upon transfer or discharge. Prior to release, offenders with serious medical and behavioral health conditions are referred to available community services. Appropriate health information is shared with the new providers in accordance with consent requirements. Provision of adequate street clothing for indigent offenders. Offender shall not release in any prison issued ative, including but not limited to jumpselts, striped scrubs, or stenciled clothing. Wealth Imprections completed release forms and documents, facility records and loge,		
offender records V-B-002 Visiting	Compliant	10.00
whether policy, procedure and practice govern visiting. The number of visitors an inflendier 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 deministrator 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 Dept. Reg. C-02-008.		
Visual Impaction: activity schedule, facility loge		
V-B-003 Library Services Written Reading materials shall be available to offenders on a reasonable basis.	Compliant - offenders must request library services	
Visual Inspection: activity achedule, facility logs V-8-004 Religious Programs Written policy, procedure and practice define and provide reasonable offender opportunity for religious practice.	Compliant	2
Visual Inspection: documentation of offender religious activities, activity achedule		
V-B-035 Exercise and Recreation Access 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 state inmates. If a state offender requires special management or has security supervision needs which preclude the opportunity for outdoor exercise at a facility, then he 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.	Compliant - Offenders are allowed recreation time weather permitting	
Visual Inspection: activity schedule, facility logs		- Indiana re-
V-8-006 Transitional Work Program/Standard Operating Procedures Transitional Work programs shall be operated in accordance with the Standard Operating Procedures for Offender Work Release Programs established by the DPS&C.	N/A	
Viewel Inspections: RPEBC monitoring report V-B-097 Participation in Transitional Work Programs Participation in transitional work programs by state offenders shall comply with R.S. 15:711 and DPSBC Department Regulation No. B-02-001 "Assignment and Transfer of Offenders." Specific approval by the Secretary of DPSBC is required prior to program assignment of state offenders. Refer to Standard Operating Procedures for Offender Transitional Work Programs.	N/A	
Visual Inspection: approval for participation by the Secretary of DFS&C		
V-B-008 Offender Work Program Participation in offender work programs by state offenders shall comply with the provision of R.S. 15:708 (parish jalks) or R.S. 15:832 (police maintenance). Visual Inspection: offender voluntary participation, sheriffe approval of work programs.	N/A	
Vasual Inspection: ottender vocuntary paracipation, energy approvat or work program request, facility loca		



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	Floring	Resonant
V-B-009 Approval for Transitional Work Programs Any Sherff Interested in operation of a TWP facility shall obtain prior approval from the Chief of Operations. Refer to Standard Operating Procedures for Offender Transitional Work Programs. Visual Inspection: approval of Chief of Operations	N/A	
V-B-010 Proposed Expansions	Compliant - The Facility is drawing out plans for	
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.	Expansions now to turn into Parish for approval. Will send it all in to Headquarters once they agreed on.	
Visual Intention VB-011 Mail and Correspondence Any Offenders may send and receive mail. Indigent offenders receive a specified postage allowance. 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.	Compliant	
Visual Inspection: documentation that offenders are notified when mail is withheld, documentation of justification for reading or rejecting mail V-9-0-01.2 Packages and Publications Written policy, procedure and practice govern offender access to publications and packages from outside sources. Wisual Inspection: documentation that offenders are notified when mail is withheld,	Compliant	
documentation of justification for reading or rejecting mail		
E REPREV		
Section 1 State Edge # 01-801 (18-24 B-01-002) (1977 # 01-004) 15-27 (
04-001/HC-80/(S-0-HEP1)	Findings	Resimplian
V-C-001 Substance Abuse Programs The facility encourages offender participation in substance abuse programs when available.	Compilant	
Visual Inspection: ficility log, activity schedule V-C-002 Reentry Programs	Compliant	
The DPS&C and the facility encourages reentry programming which includes: 1. Employment opportunities through work release; 2. At least two forms of valid identification upon release; 3. The development of a residential plan prior to release; 4. Referral to community based service providers upon release; 5. Where feasible, recommend DPS&C offenders receive 100 hours of pre-release training at a regional reentry center prior to transfer to a TWP, or release from custody. The local joil facility shall maintain reentry transition document envelops for all DPS&C offenders, which include at a minimum, if applicable: 1. Any valid forms of identification; 2. Prescriptions and Medicaid card; 3. Community service referrals. Visual Inspection: documentation of amployment opportunity, documentation of two ferres of identification, residential plan. V-C-083 Pre-Parole Praparation	Compliant	
The facility shall complete form B-01-004-C, Pre-Parole LARNA II Questionnaire for Local Jail Facilities, and submit via e-mail to DPS&C HQ at LOCALIana@corrections.state.la.us or by fax to 225-342-0929 within the first two weeks of the month proceeding the scheduled hearing. Visual Inspections, offender record, openisted questionnairs		
V-C-004 Parole Board Procedures 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. Warden or designes greated as provide beard.	Compilant	
DADT W. TICTICE	Ì	
PART VI - JUSTICE A. OPPINDER'S RIGHTS		
References: ACA CIS 1-6A-01, 1-6A-02, 1-6A-63, 1-6A-68, Dept. Rep. C-01- 004/09-C-10	Findings	Rosponse
VT-A-003 Access to Courts/Access to Legal Materials Written policy, procedure, and practice ensure the right of offenders to have access to courts. This includes reasonable access to legal reference 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 legistrante 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 inmate shall be transferred to the OPS&C.		
Visual Inspection: facility ing VI-A-002 Access to Counsel	Compliant- Policy requires offenders to request special	-
Written policy, procedure, and practice ensure offenders' confidential access to counsel. Such contact includes, but is not limited to telephone communications,	visits with counsel.	



B. FAIR TREATMENT OF OFFENDERS	oles de Vista de	
Reference: ACA C25 1-2A-16, 1-4C-01, 1-65-01, 1-65-02, Dept. Reg. 8-05- 005/UP-C-13	Findings	Response
VT-B-001 Discrimination Written policy, procedure, and practice provide that program access and administrative decisions are mode without regard to offenders' roce, religion, national origin, gender, sexual orientation, or disability.	Compliant	
Viewal Inserection: Incellity records, arterences, activity least VTT-B-002 Grievance Process 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.		
Visual Inspection; originates		

PART VII - ADMINISTRATION AND MANAGEMENT		
A. RECRUITMENT, RETENTION AND PROMOTION		70.5
References: ACA-CIS 3-1A-01, 1-1B-01, 1-1C-01, 1-1C-07, 1-4C-13, 1-4D-05, 1-4C-14, 1-7B-02, 1-7G-02, 1-7G-04, 1-7B-05, 1-4C-13, 1-7B-02, 1-7G-02, 1-7G-04, 1-7B-05, Dept. Regs. A-02-028/AM-F-22, C-01-008/OP-A-19	Findings	Response
VII-A-001 Training and Staff Development The Calify 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 planty procedures; 4. Suickde precauthon and signs of suickle risks; 5. Use of force politices; 6. Inmate rules and regulations; 7. CPR and first ald; 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.	Complient- Policy in place regarding training. Employees must successfully complete training prior to employment and annually thereafter. Documentation in file	
Visual Inspection: Jesop plans, staff training records VII-A-002 Weapons Training	Compliant	
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.		
Visual Inspection: personnel records, training records		



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B. FACILITY ADMINISTRATION References: ACA CIS 1-40-02, 1-70-01, 1-70-03, Dept. Rep. C-05-001/AM-1-4		
VII-8-001 Authority	Findings Compliant	Response
There is a statue or constitutional provision authorizing the establishment of the	roubstat	
Incal failifacility or its parent agency.		
such jan facility of its percent agency.		
Visual Inspection:	0120010 <u>0001100011000110001100011000110</u>	
VII-B-002 Legal Assistance for Staff	Compliant -Legal Assistance for staff are provided.	
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.		
Visual Inspection: personnel or training records		
VII-9-503 Independent Financial Audit	Compliant	
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:		
Viousi Inspection: pressid medit		
VII-8-004 Facility Insurance	Compliant	
Written policy, procedure and practice provide for comprehensive facility insurance		
coverage.		
Visual Inspection: Insurance policy VII-8-005 Offender Funds	Para Alland	
	Compliant	
Offenders' personal funds held by the facility are controlled by generally accepted accounting principals (GAAP). Any interest earned, other than operating funds,		l l
accounting principals (GMAP). Any imprest garness, other than operating minos, accounts to the benefit of the offenders.		
Visual Inspection: offender records		**************************************
VII-B-006 Organization	Compliant- Policy and procedures are in place for all	
Written policies and procedures describe all facets of facility operation, maintenance	areas of the facility. Administration reviews and	
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	updates annually.	
maintained with documentation (primarily written) to support compliance.		
HIGHIGHICO MICH SOCIAMICHEDOWN (Presidenty anatopy) at 2000-per combinance.		
Mount Tanastics: assess regimes discomination to code		
Visual Inspection: annual reviews, discussination to staff VII-8-007 Annual Compliance Statement	Compliant	
Written policy, procedure and practice demonstrate that the facility shall submit an	and the state of t	
annual statement confirming continued compliance with the BIG to the appropriate		
DPS&C Regional Team Leader. This statement, submitted by January 31st each		
year, is in writing and shall include:		
A copy of the current Fire Marshal Report:		
2. A copy of the current Health Inspection Report;		
3 Any proposed or projected expansions;		
Any rehabilitative programs that are available; Summary of any re-entry initiatives/programs implemented by the facility.		
Visual Inspection: annual statement		
VII-8-008 Monthly Reporting	Compliant	
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 Dept. Reg. C-05-001/AN-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 Team Leader, no later than the 20th day of the month		
for the previous month's activities.	1	
3 # (mmmmm		
Visual Inspection: monthly report VII-B-009 Staff Meetings	Committee	
Written policy, procedure and practice provide for regular meetings between the	Compliant	
Sheriff, facility administrator, or designee and all department heads. There is		
formal documentation that such meetings are conducted at least monthly.		
		11
Visual Inspection: staff meeting minutes/solus	<u> </u>	
***************************************	I.	
C. REASONABLE ACCOMMODATION References: ACA CI\$ 1-76-01 VII-C-001 Facility Equipment/Researchée Accostradation		
References: ACA CIS 1-7E-01	Findings	Response
VII-C-001 Facility Equipment/Ressonable Accommodation	Compliant	
Reasonable accommodations is made to ensure that all parts of the facility are accessible to the public are accessible and usable by staff and visitors with disabilities.		
for our business as a merchanist as as consiste at artiff that agreed and recordings.		



INSPECTION REPORTS			
Deficiencies	Corrective Action Taken		
Hood suppression was improperly tagged.	Got it inspected and re-tagged		
None			
None			
	Hood suppression was improperly tagged. None		

STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Retail Food Notice of Violations

Routine/Renewal

Permit Number 48-0001344-1	Permit Name SHERMAN R WALKER CORRECTIONAL CTR JAIL CAFETERIA			
Name of Establishment SHERMAN R WALKER CORRECTIONAL CTR		Owner Name SAINT JOHN PARISH S	Owner Name SAINT JOHN PARISH SHERIFF'S DEPT	
Address 100 DEPUTY DR LAPLACE, LA 70068		Date 10/01/2021	Time 12:05 PM	

LAC TITLE 51 PART XXIII

NON-CRITICAL ITEMS: These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.		
Category	Code Reference	Description of Violations
TOILETS/HAND WASH FACILITIES	3109	94 - 3109.5 - Soap and/or paper towels are not provided for use at the hand wash lavatory. HAND TOWELS NOT PROVIDED IN DISPENSER [Repeat]

Comments:

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY GORDON JEFFCOAT, WARDEN

COPY OF REPORT EMAILED TO g.jeffcoat@stjohnsheriff.org

NOTICE RS 40:31.38 (ACT 66)

RS 40:31.38 (ACT 66) authorizes the Louisiana Department of Health to charge a fee of \$150 to any permitted food establishment that fails to correct the necessary sanitary code violations to be in compliance at the time of its follow up inspection (1st reinspection). Re-inspections are required when there are five or more uncorrected non-critical violations and/or one or more uncorrected critical violations remaining at the conclusion of an inspection. The fee is only charged if the necessary violations are not corrected before the 2nd re-inspection and other subsequent re-inspections. Establishments can avoid this fee if the violations noted on the routine inspection report are corrected by, or during, the follow up inspection. If a fee is assessed, the \$150 fee is payable within 30 days' notice, and failure to pay shall result in revocation of the permit.

Sanitarian Name/Print Jamey Bailey	Phone # (985)536-3535	Sanitarian Signature	R.S. # 1334
The above mentioned violations	were called to my attention and were ex	plained to me in detail. I hereby agree to	
Correct Critical Violations by		Correct Non-Critical Violations by	
		Signature of Recipient	
Name/Title GORDON JEFFCOAT-WARDE	N	hit-	

STATE OF LOUISIANA DEPARTMENT OF HEALTH OFFICE OF PUBLIC HEALTH

Detention or Incarceration Notice of Violations

Routine/Renewal

Permit Number 48-02-224	Permit Name Sherman R. Walker Correctional Center-224			
Name of Establishment Sherman R. Walker Correc	tional Center-224	Owner Name	Owner Name	
Address 100 Deputy DR LaPlace, L	A 70068	Date 06/11/2021	Time 10:35 AM	

LAC TITLE 51 PART XVIII

Category	Code Reference	Description of Violations
Building Requirement	101	5 - The floors are not smooth and easily cleanable. MISSING FLOOR TILES IN 100-600 DORM SHOWER AREAS [Repeat]
Building Requirement	101	6 - The ceilings are not in good repair. I. MISSING WALL TILES NOTED IN 100-500 DORM SHOWER AREAS 2. STAINED CEILING TILES NOTED THROUGHOUT ESTABLISHMENT [Repeat]
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair. PARTIALLY CLOGGED DRAIN NOTED AT HANDWASHING SINK IN 200 DORM [Repeat]

Comments:

VERBAL ACKNOWLEDGEMENT OF REPORT PROVIDED BY GORDON JEFFCOAT, WARDEN

COPY OF REPORT EMAILED TO g.jeffcoat@stjohnsheriff.org

Number Licensed For		Number in Attendance 68	License Anniversary 06/30/2021	
Sanitarian Name/Print Jamey Bailey	Phone # (985)536-3535	Sanitarian Signature	R.S. # 1334	
The above mentioned violations were called to my attention and v		were explained to me in detail. I hereby agree to Correct Non-Critical Violations by		
The above mentioned violations Correct Critical Violations by	were called to my attention and were		by	

STATE OF LOUISIANA					
DEPARTMENT OF HEALTH					
OFFICE OF PUBLIC HEALTH					
INSTITUTION REPORT					
Agency License No.	Anniversary Month				
N/A	JUNE				
Name of Establishment	Mailing Address				
ST. JOHN WEST BANK HOLDING FACILITY-224					
Address					
2393 HIGHWAY 18					
City, state, Zip Code					
EDGARD LA 70049					
Type of Facility					
JAILS 0					
Parish	Date Inspected	<u> </u>			
St. John the Baptist	06/17/2021				
The above establishment has been inspected by a representative of this section, and:					
License is Recommended;					
License is Not Recommended;					
License is Pending Reinspection;					
from the standpoint of sanitation	JAMEY BAILEY 1	3 3 4			
LHS 48 (R 7/99)		D 1014			