DEPARTMENT OF PUBLIC SAFETY & CORRECTIONS STATE OF LOUISIANA

JEFF M. LANDRY Governor



JAMES M. LE BLANC

April 15, 2024

MEMORANDUM

TO: The Honorable Gerald A. Turlich Jr. of Plaquemines Parish ca FROM: ames M. Le Blanc Secretary

RE: "Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection conducted at Plaquemines Parish Detention Center on March 13, 2024. The facility continues to provide a secure, safe, and stable environment for DOC inmates in their custody. Plaquemines Parish Detention Center is to be commended for the exceptional educational programming offered to the inmate population.

At this time DPS&C will continue with annual monitoring visits. Thank you for your support of the BJG process.

JML/mk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association Denise Narcisse, Warden, Plaquemines Parish Detention Center Seth Smith, Chief of Operations Donnie Bordelon, Warden, EHCC Aaron Hooper, BJG Team Leader

P. O. Box 94304 🛊 Baton Rouge, Louisiana 70804-9304 🍁 (225) 342-6740 🍁 Fax (225) 342-3095 🍁 www.doc.louisiana.gov An Equal Opportunity Employer



BASIC JAIL GUIDELINES MONITORING REPORT

Annual

Ver. 11/28/2023 mwk

Facility Name:
BJG Team Leader & Monitors:
Facility Warden & Email Address:
Facility Staff:
BJG Inspection Date:
Previous BJG Inspection Date:
Operational Capacity:
Count on Day of Visit:

Plaquemines Parish Detention Center Aaron Hooper, BJG Team Leader Warden Denise Narcisse / <u>Dnarcisse@ppso.net</u> David Gambino, Captain & Jeff Pelas, Lieutenant March 13, 2024 April 11, 2023 600 **540**

List Concerns or Issues from the previous BJG Monitoring Inspection:

Count on the Day of Visit:

	# MALE	# FEMALE	TOTAL
Number of DOC Inmates	239	8	247
Number of Local Inmates	86	12	98
Number of Out of State Inmates	40	0	40
Number of Federal Inmates	148	0	148
Number of ICE Detainees	0	0	0
TOTAL	520	20	540

Number of DOC Inmates that are:

Single Bunked	0
Double Bunked	236
Triple Bunked	0
Total	236

Number of DOC Inmates that are in Restricted Housing:

Single Bunked	11
Double Bunked	0
Triple Bunked	0
Total	11

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

Month/Year	Inmate/Inmate	Inmate/Inmate w/ Significate Injury	Inmate/Staff	Inmate/Staff w/ Significate Injury
March 2023	4	0	3	0
April 2023	6	0	0	0
May 2023	5	0	0	0
June 2023	3	0	2	0
July 2023	4	0	1	0
August 2023	3	0	1	0
September 2023	5	0	0	0
October 2023	4	0	2	0
November 2023	1	0	3	0
December 2023	1	0	0	0
January 2024	7	1	5	0
February 2024	1	1	2	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
March 2023	10	0	0	0	0
April 2023	25	0	1	0	0
May 2023	3	0	1	0	0
June 2023	3	6	17	0	0
July 2023	1	4	30	0	0
August 2023	3	0	0	0	0
September 2023	0	0	5	0	0
October 2023	2	0	4	0	0
November 2023	5	0	3	0	C
December 2023	3	0	6	0	0
January 2024	29	0	5	0	C
February 2024	42	1	14	0	1

GENERAL APPEARANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY

Living Area: The living areas were clean and Inmate's property neatly stored

- **Dorms** The dorms were spaced out with a large TV room and plenty of tables to sit at. Two story floor in each dorm with showers and toilets on each floor. Dorms were clean and odor free.
- Cell Block Clean and Odor free

Culinary/Dining: During the inspection, the food preparation area was neat and clean. The food storage area was neat and clean. A shadow board was kept locked up with the culinary tools engraved and inventoried daily. Hand washing stations had soap and towels.

Bathrooms: Bathroom areas were clean and operational. Faucets and temperatures were checked

Yard Areas: Each dorm has yard areas on the back ends of the dorms. There is also a big gym area in the facility for Inmates to exercise in.

Maintenance: The Facility has a maintenance department and staff on grounds. There is a master inventory of the tools and a sign out sheet and checklist with tools when they are out being used.

REVIEW AN	ID COMMENT ON THE FOLLOWING BASIC JAIL GUIDELINES: (Compliant or Non-Compliant)				
I-A-001	Safety/Sanitation/Inspections (MANDATORY): Compliant The facility is conducting weekly inspections. FM and DHH inspections are done on time and all deficiencies have been addressed.				
I-C-001	Emergency Plan (MANDATORY): Compliant An emergency plan is in place. Employees are trained and knowledgeable of the plans. Emergency plan exit maps are posted throughout the facility.				
I-C-003	Fire Safety/Code Conformance (MANDATORY): Compliant Policy and procedure are in place.				
II-A-006	Staff Log (MANDATORY): Compliant Logs are placed in all areas of the facility and contain required information. Facility forms are completed for notification of incidents to the administration.				
II-A-007	 Counts (MANDATORY): Compliant How many formal counts are conducted each shift? Three How many counts are conducted each day? Six Stick outs counts How does the facility accomplish this? Inmates are signed out for outside work details. The officer calls in at 11:00 am to the main control and confirms that the Inmates are still in their possession. All Inmates are signed back in the facility at 3:30 pm Does this process ensure accountability and safe/secure operation of the facility? 				
	Yes				
II-A-008	Inmate Population Management System - Compliant All information is documented and maintained on each Inmate and is transferred with the Inmate if transferred out of the facility.				
II-A-010	Admissions - Compliant Policy and procedure are in place and all admission forms are thorough and completed.				
II-A-012	Classification System: Compliant Does the facility have any trustees who work outside the secure perimeter? Yes				
	If yes,				
	 What is their classification process to determine who is eligible for trustee status? The classification officer will use screening systems to determine trustee status. The Inmate's history is reviewed as well as current charges. The warden has the final sign off on the Inmate to become trustee. Does their classification process meet DPS&C, Corrections Services' criteria? Yes 				
II-A-016	Photo Identification (MANDATORY): Compliant				

II-A-018

Inmate Drug Testing (MANDATORY): (List monthly since the previous BJG monitoring visit.)

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
March 2023	16	296	5%	0
April 2023	18	327	5%	6
May 2023	15	288	5%	2
June 2023	22	365	6%	6
July 2023	22	236	9%	4
August 2023	33	228	14%	1
September 2023	32	226	14%	0
October 2023	16	250	6%	0
November 2023	14	248	5%	0
December 2023	30	236	12%	6
January 2024	14	240	6%	1
February 2024	17	239	7%	0

II-A-019 Inmate Transfers: Compliant

All paperwork is completed and approved before any Inmate transfers are completed.

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

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

II-B-002-1 Use of Restraints for Pregnant Inmates: Compliant The facility's policy is compliant with DOC Regulations.

II-C-001 Procedures for Searches: Procedures for Searches - Compliant

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

II-D-001 Key, Tool, and Utensil Control (MANDATORY): Compliant The facility's tools, key, and utensil control were found to be in good order. Inventories and documentation are kept up daily. A shadow board with a lock in key for the culinary utensil is being used.

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

- Does the facility's Inmate orientation include the application process for applying for restoration of good time? Yes
- What is their restoration of good time application process for the Inmate population? It is handled during the Inmates' orientation, they are explained the process and steps to take.
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes
- IV-A-003 Food/Dietary Allowances (MANDATORY): Compliant

IV-A-006 Food Services Management (MANDATORY): Compliant

A copy of a cycle menu was observed to have at least two hot meals served daily. Sample trays located in cooler with last 72 hours

IV-B-001 Plumbing Fixtures – Toilets & Washbasins (MANDATORY): Compliant Inmates have access to appropriate toilets and washbasins.

Page | 4

IV-B-002	Plumbing Fixtures – Showers (MANDATORY): Compliant The water temperatures were observed to be appropriate.			
IV-B-005	Personal Hygiene (MANDATORY): Compliant Inmates are provided with adequate supplies necessary for maintaining personal hygiene.			
IV-C-001	Access to Care/Clinical Services (MANDATORY) (Does the facility charge a co-payment? If so, approved by DPS&C?): Compliant Inmates receive a facility handbook upon admission that contains all necessary information on assessing health care. Health care services are contracted through Correct Health and they provide a wide range of services.			
IV-C-003	Provision of Treatment (MANDATORY): Compliant Policies in place.			
IV-C-005	24 Hour Care (MANDATORY): Compliant Inmates have access to 24 hour care.			
IV-C-006-1	Pregnancy Management (MANDATORY): Complaint The facility's policy is compliant with DOC Regulations.			
IV-C-008	Annual TB Testing: Compliant The facility conducted TB testing on all Inmates at no cost to the Inmate. This is done upon intake and annually.			
IV-C-009	Chronic Care Program (MANDATORY): Compliant Policy and procedure are in place.			
IV-C-012	Access to Sick Call - Compliant Inmates can request sick call at daily medication pass and are seen within 72 hours. The facility provides a medical provider to see Inmates Monday - Friday.			
IV-C-013	Infirmary Care - Compliant The facility has 24/7 medical care services. If medical staff determines the health issues to be an emergency need, Inmate is transported to UMC Hospital.			
IV-C-013-1	Medical Releases (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): Compliant - Policies in place.			
IV-C-014	Suicide Prevention and Intervention (MANDATORY): Compliant The facility's mental health staff evaluates each Inmate, manages the needs, and determines treatment. All staff receive annual suicide prevention training.			
IV-C-015	Inmate Deaths (MANDATORY): Compliant Facility has a policy in place for actions to be taken in the event of an Inmate's death.			
IV-C-016	Notification: Compliant Policies in place to notify family members if the Inmate is in ICU.			
IV-D-001	Healthcare Quarterly Meetings (MANDATORY): Compliant Correct Health meets at least quarterly.			

Page | 5

- **IV-D-004** Confidentiality of Health Information/Individual Health Record: Compliant Access to Inmate medical information/files is controlled and restricted to those who have legal authority. Medical records are stored in a secure restricted area and are forwarded with Inmates upon transfer to another facility or DPS&C.
- IV-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY): Compliant - Policies in place.
- IV-D-007 Internal Review/Quality Assurance (MANDATORY): Compliant Policy is in place for internal reviews upon conclusion of a serious event.
- IV-E-001 Alleged and Substantiated Sexual Assaults Compliant The Facility is following DPS&C PREA guild lines
- V-A-004 Religious Programs: Compliant
- V-A-005 Exercise & Recreation Access (MANDATORY): Compliant Each dorm has its own yard areas on the back ends of the dorms doors open from 9 am-5 pm. There is also a big gym area in the facility for Inmates to exercise in.

V-B-001 Programs and Services:

- List all Certified Treatment Programs (Attach Form IS-B-8-b) GED (HI-Set) South Regional Reentry Program (Carpentry, C-Tech, OSHA 10) Standardized Pre-Release Curriculum-2010 Living in Balance Malachi Dads Thinking for a Change Moral Recognition Therapy Anger management Individual Counsel/Mental Health Group Therapy- Substance Abuse
- List all other Inmate Programs Religious Services
- V-B-002 Educational Programming:

GED Program

Number of GED Slots	40
Number of Participants	40
YTD Number of Completions	19

- V-B-003 Substance Abuse Programs: Compliant
- V-C-001 Releasing Inmates: Compliant

Inmates are released with property and identification that was collected upon intake. Inmates are also released with prescribed medications.

- V-C-002 Regional Reentry Programs (Are Inmates released with two valid forms of identification?): Compliant. Inmates are released with two valid forms of identification.
- V-C-004 Parole Board Procedures: Compliant

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

- Does grievance process include two levels of review? Yes
- Who are the designees at each level? Officer that opens the grievance, The Officer's Supervisor, then either Medical Supervisor or the Warden
- What is the specified time period for response at each level? 72 hours
- VII-A-002 Weapons Training: Weapons Training Compliant Deputies are POST certified and receive appropriate training regarding the use of handling and retention of weapons.
- VII-B-010 Monthly Reporting: Compliant Facility turns in all monthly reports in a timely manner. All reports are accurate and detailed.
- VII-B-012 Proposed Expansions: Compliant No expansions at this time.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

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

INMATE COMMENTS/MORALE/QUALITY OF LIFE:

No complaints were made by any Inmate during the walk through. Talked to the Inmates working in the kitchen, and they liked the quality of the food. No complaints were made.

RECOMMENDATION:

At this time, continued annual monitoring visits are recommended.

Page | 7



Office of State Fire Marshal

8181 Independence Blvd. Baton Rouge, LA 70806 (225) 925-4911 (800) 256-5452 Fax (225) 925-4241

Inspection Report Report # CB-22-004217-1



Daniel H. Wallis FIRE MARSHAL

John Bel Edwards GOVERNOR

No Deficient/Cautionary Codes cited.

		Loc	ation Inform	nation			
Inspection Type Compliance Building Inspection					nspection Da	te	4/17/2023 12:17:39 PM
Structure ID	68347	No. of Buildi	ings 1	F	acility Code		J360
Capacity	882	Year Built	2014	C	construction	Туре	Type IIIA / (211)
Building/Trade Na PLAQUEMINES P		TION	Addres 16801		AY 15, POINT	EALA	HACHE, LA 70082
		0	wner Inform	ation			
Owner Type Name				Conta	ct Phone	Conta	ct Email
Municipal Project		PLAQUEMINES PARI ENFORCEMENT	SH LAW	H LAW (504) 934-7613		JPELA	AS@PPSO.NET
Address							
POST OFFICE BO	X 68, POINTE	A LA HACHE, LA 7008	2				
		Те	nant Inform	ation		-	
Name			Suite Numbe			er	Square Footage
		0	ccupancy D	otaile			
Occupancy Type		Details	coupancy o	cluits			
Institutional		INSTITUTIONAL BUIL	DING TYPE: CTION FACIL	GROUP	I-3 (DETENT E: CONDITIC	ION/CC	DRRECTION);
			Comment	s			and the state of t
EGRESS DOOR K	EY CHECK LC	G WELL MAINTAINED).		-		a an an ann an an an an an an an an an a
LAST ANNUAL GE	NERATOR IN	SPECTION: 04/07/23.					
ENERGENCY EG	DESS DI AN TI	RAINING LOGS WELL	MAINTAINED	1			
LIFE SAFETY SYS	STEM HAVE CU	JRRENT CERTIFICAT	IONS AND AP		JRMAL CONL	DITION.	
OFFENDERS PRE CAPACITY: 882.	SENT: 618.						
	FEICIENCIES	DBSERVED AT TIME	DE INSPECTI	ON			
	EFICIENCIES (DBSERVED AT TIME	DEINSFECT	UN.			
CORRECTIONAL	OCCUPANCIE	S IN THE STATE OF L	OUISIANA SI	HALL BE	INSPECTED	BYTH	021, ALL DTENTION AND E OFFICE OF STATE FIRE S THE ANNUAL ISNPECTION
		Insi	pector Infor	mation			and the second
Name: Joshua C	orrea	Badge Number: 602			ctor Signature		John our
		Person to whom	n requireme	nts we	re explaine	d	W4->
Name: Jeff Pelas		Title: Maintenance D		Signa	to una t	J.M.	

LH5-46 (R'5/90)

	DETENTION OR INGARCERATION FACILITY					
PADIO	BH PLAQUEMNES	DATE 12.5.23				
INSTI	TUTION PLAQUEMINES PARISH DENTENTI	ON CENTER MAX, CAPACITY				
ADDF	11 0 - 11 111					
NO. N	C.1	NO. JUVENILESTOTAL 547				
	EM IS UNSATISFACTORY MARK WITH AN [X]	COMMENTS:				
1.	Building: floors, walls and ceilings: Clean, good repair[]	CHEMICAL STORAGE, OK				
2.	Insect and rodent protection: Tight-fitting doors[] Windows; good repair, insect proof[] Approved control methods[]	BBIOI (DAYROOM) = OK				
.3.	Handwashing lavatories: Hot and cold water as required[]	BAIDI (DAYROOM) - OK				
4.	Toilet facilities as required []	CCIOI (WOMEN'S) = 2084, B. CD = (LOSEI) DUT LOMUNISTRATURE DELIGION				
5.	Approved bathing facilities	LOUPSTLIES MIDDLE SINE (2017)				
6.	Safe drinking water; each cell, cell block or dermitory[].	MEDICAL : E125 : WALLS WITH MOLD. LIKE				
7.	Lighting as required []	SUBSTANCE				
8.	Forced ventilation []	- enzior				
9.	Gas heaters vented []	- DENTAL : OK				
10.		COFFLECTS				
11.	Approved waste disposal []	INTSICE DIATS TONET NOT MORICING				
12.	Mattresses and pillows: Good condition and clean []					
13.	Isolation cell for Communicable	D139:0K				
14.	Food source []	0135 = 014				
	Floor space: Min. 48 sq. ft. or approved/Court Order	FAID: SHOWERS OFF (ADMIN. DECISION FCIDI: JANYOR CLOSET: OK				
16.	Visitor walting room: Sánitary facilities available	2				

Declaration of Inspection:

Signature of this report by the responsible official asserts that all places where inmates are held, sleep, eat, recreate or work within the facility, have been inspected at this time.

R. FERRER exor. 1219 SANITARIAN FAGILITY OFFICIA

Routine Reinspection Pre-Opening Complaint	Retail Food Inspection Report
Permit #: Type of Establishment:	LAC Title 51 Part 23
Name: A Standies Owner: ASL	PLAQUEMINES PARISH GOVERNMENT DEPARTMENT OF HEALTH
Address: WEEL AND A STATISTICS AND ADDRESS	Date: 12/5/23 Time: 1000an

CRITICAL ITEMS: These items relate directly to the protection of the public from food borne illness. These items MUST BE CORRECTED IMMEDIATELY (see compliance schedule below). Repeat violations may lead to enforcement actions or permit suspension.

Item	Code Reference	Description of Violations	

NON-CRITICAL ITEMS: These items relate to design, sanitation and maintenance of food service operations. These items should be corrected by the next regular inspection or according to the compliance schedule established by this office (see below).

Item	Code Reference	Description of Violations	
			-
			_
	+		
			-

Comments: When 140° . Russe with	y parala a sana sa sa sa sa na sana sa	
Sanitarian:	R.S.# (Phone: 504-934-6690
The above-mentioned violations were called to to correct the critical violations	my attention and were explained to,20 and non-critical	
Signature of recipient:	Title:	Page of

Plaquemines Parish Health Department 3706 Main Street Belle Chasse, La. 70037

PLAQUEMINES PARISH SHERIFF'S OFFICE DETENTION CENTER

CORRECTIVE ACTION / WORK ORDER REQUEST FORM

Date & Time of Request: 12/5/2023	Location: CC101
Reported by: Health Inspector	
Description of Request: Middle sink stays runr	ning
Advintore	Submit by Email
	ance Use Only
Date & Time Received: 12/5/2023 Description of Completed Work: Changed time	r on sink
Completed By: Dy Lebrarf	Date & Time Competed: 12/5/2023 210Pm

PLAQUEMINES PARISH SHERIFF'S OFFICE DETENTION CENTER

CORRECTIVE ACTION / WORK ORDER REQUEST FORM

Date & Time of Request: 12/5/2023	Location: Medical E125
Reported by: Health Inspector	
Description of Request: Walls with mold like sub	ostance
	Submit by Email
Maintenane	ce Use Only
Date & Time Received: 12/5/2023 Description of Completed Work: <u>Cleased</u> entit	e bathroon and painted.
Completed By: LL Palas	Date & Time Competed: 12/8/2023 10:10 Au

Form I	3-04-0	03-B
--------	--------	------

05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility: P.P.D.C	*			
Date: 1 11 20.24				
Date: 1/11/20.24 Name of Program: HiSet		з		
Date of Program Implementation: 2010				
Primary Area of Service Provided:				
Education				
Job Skill Training Volume Development IE in Development				
□ Values Development and Faith Based Initiatives				
Treatment Programs				
□ Miscellaneous				
Program has been certified by DPS&C?	Jo			
Program application process is consistent with DPS&C existing	assessment a	nd classificati	on system?	
Yes I No		,		
Has program curriculum changed during preceding 12 months?	□ Yes	No		
Is there an objective method used to assess completion?	Tes	🗆 No		
Detailed records are maintained on the following:				
All offenders who apply.	Yes	D No		
Number of offenders accepted.	Tes	□ No		
Number and type of services provided.	Tes	□ No		
Offender's completion/termination from program.	Yes	□ No		
Is there a formal graduation ceremony for those who complete the			due to	Covid
The CTRP referenced above continues to meet necessary criteria Department of Public Safety and Corrections.	to maintain i	ts certification	n by the	00.0
Ded bon		210	bu	

Monitoring Team Member or BJG Team Member/Leader

Date 5/13/24

05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility: $\mathcal{P} \cdot \mathcal{P} \cdot \mathcal{D} \cdot \mathcal{C}$			
Date: 1/11/2024 Name of Program: Carpentry/DSHA, (-Tech	N .	
Name of Program: Carpentry USAR,			
Date of Program Implementation: 2016			
Primary Area of Service Provided:			
Job Skill Training			
Values Development and Faith Based Initiatives			
□ Treatment Programs			
□ Miscellaneous			
Program has been certified by DPS&C?			
Program application process is consistent with DPS&C existing as $rac{1}{2}$ / es $rac{1}{2}$ No	sessment and c	lassification system?	
Has program curriculum changed during preceding 12 months?	□ Yes	IN0	
Is there an objective method used to assess completion?	Yes	□ No	
Detailed records are maintained on the following:			
All offenders who apply.	I Yes	🗆 No	
Number of offenders accepted.	🕒 Yes	🗆 No	
Number and type of services provided.	T Yes	🗆 No	
Offender's completion/termination from program.	Yes Yes	🗆 No	
Is there a formal graduation ceremony for those who complete the	program?	Yes due	u Covid
The CTRP referenced above continues to meet necessary criteria to Department of Public Safety and Corrections.	o maintain its c	ertification by the	

Monitoring Team Member or BJG Team Member/Leader

313/24 Date

Form	B-0	4-0	03	-B
------	------------	-----	----	----

05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM **CERTIFICATION OF CONTINUED COMPLIANCE**

Facility: P. P. D. C.	*		
Date: 1 11 2024			
Name of Program: Pre-Release		*	
Date of Program Implementation: 2016			
Primary Area of Service Provided:			
□ Education			
Job Skill Training			
Values Development and Faith Based Initiatives			
□ Treatment Programs			
□ Miscellaneous			
Program has been certified by DPS&C?	D		
Program application process is consistent with DPS&C existing a Ves	ssessment ar	nd classification sys	tem?
Has program curriculum changed during preceding 12 months?	□ Yes	D-No	
Is there an objective method used to assess completion?	Ves	□ No	
Detailed records are maintained on the following:			
All offenders who apply.	Yes	□ No	
Number of offenders accepted.	Ves	□ No	
Number and type of services provided.	Yes	□ No	
Offender's completion/termination from program.	Yes	□ No	

Is there a formal graduation ceremony for those who complete the program? The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.

Monitoring Team Member or BJG Team Member/Leader

3/13/

Form B-04-003-B 05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility:

P.P.D.C

Date:

1/11/2024

Name of Program: Living in Ba lance

Date of Program Implementation: 2019

Primary Area of Service Provided:

	Education

Job Skill Training

Values Development and Faith Based Initiatives

Treatment Programs

Miscellaneous

						/		
Program	has	been	certified	by [DPS&C?	N	Yes	No
rogram	inau	DOCI	ournied	wy i			100	140

Pr	ogram	application	process is con	sistent with DI	S&C existing	assessment	and classification	system?
V	Yes	No No						

Has program curriculum	h changed during	preceding 12 months?	Yes	No
------------------------	------------------	----------------------	-----	----

V Yes Is there an objective method used to assess completion?

Detailed records are maintained on the following:

All offenders who apply.	Yes	1 No
Number of offenders accepted.	Yes Yes	No No
Number and type of services provided.	Yes Yes	No No
Offender's completion/termination from program.	Yes	No No

Is there a formal graduation ceremony for those who complete the program?

1 Yes 1 No

No No

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.

eltor

Monitoring Team Member or BJG Team Member/Leader

Date 3/13/24

05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility: P. P. D. C			
Date: 1 11 2024		- side	Dur Jacks
Date: 1/11/2024 Name of Program: Parenting - Malachi Day	ds + 1	-115-140	0
Date of Program Implementation: 2019			
Primary Area of Service Provided:			
□ Education			
Job Skill Training			
Values Development and Faith Based Initiatives			
Treatment Programs			
□ Miscellaneous			
Program has been certified by DPS&C? Yes IN	0		
Program application process is consistent with DPS&C existing a	ssessment and	l classificatio	n system?
Yes 🗆 No			
Has program curriculum changed during preceding 12 months?	□ Yes	No	
Is there an objective method used to assess completion?	Yes	🗆 No	
Detailed records are maintained on the following:			
All offenders who apply.	Yes	🗆 No	
Number of offenders accepted.	Yes	🗆 No	
Number and type of services provided.	Ves	🗆 No	
Offender's completion/termination from program.	Yes	🗆 No	
Is there a formal graduation ceremony for those who complete the	e program?	🗆 Yes	due to Covid

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.

3/13/24 Date

Monitoring Team Member or BJG Team Member/Leader

Form B-04-003-B		
05 November 2010		
CERTIFIED TREATMENT AND REHABI CERTIFICATION OF CONTINUE	LITATION D COMPLIA	PROGRAM NCE
Facility: P. P. D. C.	2	
Date: 1 11 2.024	1	
Name of Program: T4C Thin	King for a	a Change
Date of Program Implementation: 2018		
Primary Area of Service Provided:		
□ Education		
Job Skill Training		
□ Values Development and Faith Based Initiatives		
□ Treatment Programs		
Miscellaneous		
Program has been certified by DPS&C? \Box Yes \Box N	No	
Program application process is consistent with DPS&C existing Yes	assessment ar	nd classification system?
Has program curriculum changed during preceding 12 months?	□ Yes	D-No
Is there an objective method used to assess completion?	D Yes	□ No
Detailed records are maintained on the following:		
All offenders who apply.	Yes	□ No
Number of offenders accepted.	Yes	□ No
Number and type of services provided.	Yes	□ No
Offender's completion/termination from program.	I Yes	□ No
Is there a formal graduation ceremony for those who complete the		Que to Covid
The CTRP referenced above continues to meet necessary criteria Department of Public Safety and Corrections.	to maintain its	s certification by the
Monitoring Team Member or BJG Team Member/Leader	Date	

Form B-04-003-B			
05 November 2010			
CERTIFIED TREATMENT AND REHABII CERTIFICATION OF CONTINUED			
Facility: P. P. D. C			
Date: 1/11/2024			
Name of Program: MRT Moral	Relog.	pition	Therapy
Date of Program Implementation: 2019	/		//
Primary Area of Service Provided:			
\Box Education			
Job Skill Training			
Values Development and Faith Based Initiatives			
Treatment Programs			
□ Miscellaneous			
Program has been certified by DPS&C? \Box Yes \Box N	0		
Program application process is consistent with DPS&C existing a ∇ Yes \Box No	ssessment and	l classificati	ion system?
Has program curriculum changed during preceding 12 months?	□ Yes	1 No	
Is there an objective method used to assess completion?	I Yes	D No	
Detailed records are maintained on the following:			
All offenders who apply.	Tes	□ No	8
Number of offenders accepted.	Yes		
Number and type of services provided.	Yes		
Offender's completion/termination from program.	Yes	□ No	
Is there a formal graduation ceremony for those who complete the	program?	□ Yes	INO (due to)
The CTRP referenced above continues to meet necessary criteria t Department of Public Safety and Corrections.	o maintain its	certification	n by the
Monitoring Team Member or BJG Team Member/Leader	Date		

05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility: P. D. C. Date: 1 11 2024 Name of Program: Cage Your Rage Date of Program Implementation: 2020 Primary Area of Service Provided: □ Education □ Job Skill Training Values Development and Faith Based Initiatives Treatment Programs 5 □ Miscellaneous Program has been certified by DPS&C? N/PC D No Program application process is consistent with DPS&C existing assessment and classification system? Yes D No Has program curriculum changed during preceding 12 months? □ Yes NO Is there an objective method used to assess completion? Tes D No Detailed records are maintained on the following: All offenders who apply. D No Number of offenders accepted. Ves D No Number and type of services provided. 7 Yes D No Offender's completion/termination from program. 1 Yes D No

Is there a formal graduation ceremony for those who complete the program?

□ Yes to Covid

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.

Monitoring Team Member of BJG Team Member/Leader

3/13/24

05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility: P. P. D. C			
Date: 1/11/2024 Name of Program: Individual Counse	Imen	tai He	arth
Name of Program: Individual Coard	1.		
Date of Program Implementation: 2020			
Primary Area of Service Provided:			
□ Education			
Job Skill Training			
Values Development and Faith Based Initiatives			
Treatment Programs			
□ Miscellaneous			
Program has been certified by DPS&C? Yes No			
Program application process is consistent with DPS&C existing as	sessment and	classification s	ystem?
Yes 🗆 No			
Has program curriculum changed during preceding 12 months?	□ Yes	D'No	
Is there an objective method used to assess completion?	Tyes	🗆 No	
Detailed records are maintained on the following:			
All offenders who apply.	Yes	□ No	
Number of offenders accepted.	Yes	□ No	
Number and type of services provided.	Yes	🗆 No	
Offender's completion/termination from program.	Ves	🗆 No	
Is there a formal graduation ceremony for those who complete the	program?	□ Yes	ano-due to Covid

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.

Monitoring Team Member or BJG Team Member/Leader

3/13/24 Date

05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM CERTIFICATION OF CONTINUED COMPLIANCE

Facility: P. P. D. C				
Date: 1/11/2024		ĩ		
Date: 1/11/2024 Name of Program: Group Therapy-S	jubsta	ance A	buse	
Date of Program Implementation: 2014				
Primary Area of Service Provided:				
□ Education				
□ Job Skill Training				
Values Development and Faith Based Initiatives				
Treatment Programs				
□ Miscellaneous				
Program has been certified by DPS&C?	lo			
Program application process is consistent with DPS&C existing a	assessment and	d classification s	system?	
Yes 🗆 No				
Has program curriculum changed during preceding 12 months?	□ Yes	IN0		
Is there an objective method used to assess completion?	Tes	□ No		
Detailed records are maintained on the following:				
All offenders who apply.	Tes	□ No		
Number of offenders accepted.	Tes	□ No		
Number and type of services provided.	Ves	□ No		
Offender's completion/termination from program.	I Yes	D No		
Is there a formal graduation ceremony for those who complete the	e program?	□ Yes	No.	

The CTRP referenced above continues to meet necessary criteria to maintain its certification by the Department of Public Safety and Corrections.

Monitoring Team Member or BJG Team Member/Leader

3/13/24

Sexual Assault BJG Pre Audit Questionnaire

JO-1-IV-E-001-a 08/10/2023

	Facility Information
and the second se	cility: Plaquemines Parish Detention Center
Physical Ad	dress: 110 Prison Rd.
City Braith	waite State LA Zip: 70040
	enise Narcisse
Current Pop	pulation of Facility: 544
Which popu	lation(s) does the facility hold? Females Males Hales Hales Hales
Number of s	staff currently employed by the facility who may have contact with inmates: 61
Number of a	contracts with contractors who may have contact with inmates: 41
Number of v	volunteers who have contact with inmates: 0
nmates and	units, does the facility maintain sight and sound separation between youthful (18 and under) d adult inmates? Juveniles have never been housed at P.P.D.C. cility have a video monitoring system, electronic surveillance system, or other monitoring
echnology?	Yes, Video monitoring system
Does the fac for services	cility have medical and mental health services onsite? If no, provide offsite facility designated ? Yes
	Facility Requirements
	Attach example of practice
	ine: Unit must have a written policy outlining a zero tolerance policy for sexual abuse, assault, ment, to include the following provisions:
	 Procedure for screening new hires relative to a history of sexual abuse convictions.
	 Procedure for screening inmates for risk of sexual victimization/abusiveness.
	 Training of staff, volunteers and inmates in the policy.
	 Requirement for reporting resource to be posted in congregate setting areas (i.e. housing units and food services).
	 The process for privately reporting sexual abuse, assault, and/or harassment incidents.
	 Regular unannounced rounds by supervisors to monitor for sexual assault included in policy.
	 Sight and sound separation between inmates under the age of 18 and inmates over the age of 18 or alternatively continuous supervision of these populations when they are together.
	A practice for announcing cross gender rounds in housing areas.
	Prohibition of cross-gender strip searches.
	 Provision of privacy in bathroom and shower areas with visual barriers, shower curtains, etc.
	 Resources that will be provided for disabled (hearing impaired, visually impaired, cognitive impaired and physical impaired) inmates to receive information regarding the reporting mechanisms for sexual assault
	 Facility response plan to allegation of sexually abuse/assault, either at the facility or at another facility. This shall include notification/inquiry made to the facility where the alleged abuse occurred.
	 Designation of hospital for inmate forensic exam upon claims of sexual assault.
	Provision of mental health services would be offered to a victim of sexual assault (either the services are services as a service of the service of
	through appointment with local MH center, onsite practitioner, or volunteer).

Sexual Assault BJG Pre Audit Questionnaire

Facility Requirements

- Procedure for screening new hires relative to a history of sexual abuse convictions.
- Upon the new hire process all applicants go through an extensive background check preformed by PPSO Internal Affairs Division.
- Procedure for screening inmates for risk of sexual victimization/abusiveness.
- Upon arrival new inmates are given a PREA Questionnaire that is filled out during their Intake and Booking process.
- Training of staff, volunteers and inmates in the policy.
- Training within regards to staff is done through PPSO'S PREA Policy which all official PPSO staff must read and acknowledge before even being allowed on to PPDC grounds. Once a staff member acknowledges the policy the staff member, the staff member is stating that they competently understand this policy. Volunteers are never allowed on PPDC grounds without a official member of PPSO staff escorting them at all times while within the facility. Inmates receive a copy of PPDC inmate's rules and regulations which outlines the PREA policy within regards to their rights.
- Requirement for reporting resource to be posted in congregate setting areas (i.e. housing units and food services).
- Reporting resources include the able to personally speak to a ranking officer to verbal report any
 incidents. Also the ability to report any incidents electronically through the messaging kiosk located on
 the dormitories or can submit a handwritten report of any incidents.
- The process for privately reporting sexual abuse, assault, and/or harassment incidents.
- Reporting resources include the able to personally speak to a ranking officer to verbal report any
 incidents. Also the ability to report any incidents electronically through the messaging kiosk located on
 the dormitories or can submit a handwritten report of any incidents. Any and all PREA reports no
 matter the route they are reported are always keep confidential and are only read, reviewed, and
 investigated by staff members who are specially trained in PREA investigations.
- Regular unannounced rounds by supervisors to monitor for sexual assault included in policy.
- Supervisors make multiple unannounced rounds all threw out there assigned shifts.
- Sight and sound separation between inmates under the age of 18 and inmates over the Age of 18 or alternatively continuous supervision of these populations when they are together.
- PPDC does not and has never housed any inmate under the age of 18
- A practice for announcing cross gender rounds in housing areas.
- PPDC employs both male and female staff members at no time during any shift are "rounds" announced inmates are required to be presentable at all times. PPDC employees both male and female are allowed at any time to be on the male dorms. The only time a "round" could or would be announced is if a maintenance worker or a male supervisor needs to go on any female dormitory to conduct official sheriff's office business only. While under the watch of the female deputy that would assigned to the female housing unit. The reason that "round" would be announced is to make sure that the female inmates are out of any showering areas and that the female inmates are completely dressed before any male staff member can even begin to enter the female housing unit. If a call for assistance, or medical emergency would be the only time any exception could or would be made.
- Prohibition of cross-gender strip searches.
- PPSO employees of the opposite sex are not under any means allowed to strip search any inmate of the opposite sex.
- Provision of privacy in bathroom and shower areas with visual barriers, shower curtains, etc.
- All of the dormitories within PPDC are equipped with shower doors and bathrooms visual barriers separating all urinals and toilets.

- Resources that will be provided for disabled (hearing impaired, visually impaired, cognitive impaired and physical impaired) inmates to receive information regarding the reporting mechanisms for sexual assault.
- Reporting resources include the able to personally speak to a ranking officer to verbal report any
 incidents. Also the ability to report any incidents electronically through the messaging kiosk located on
 the dormitories or can submit a handwritten report of any incidents.
- Facility response plan to allegation of sexually abuse/assault, either at the facility or at another facility. This shall include notification/inquiry made to the facility where the alleged abuse occurred.
- As long as inmates are within PPSO custody any PREA compliant no matter of where the incident may take place are investigated thoroughly by a qualified staff member.
- · Designation of hospital for inmate forensic exam upon claims of sexual assault.
- Inmates are taken to University Medical Center (UMC) for a forensic exam.
- Provision of mental health services would be offered to a victim of sexual assault (either through appointment with local MH center, onsite practitioner, or volunteer).
- If any services are needed to any victim of sexual assault an appointment will be made with the medical contract company through the medical onsite practitioner.