

DEPARTMENT OF PUBLIC SAFETY & CORRECTIONS
STATE OF LOUISIANA

JEFF M. LANDRY
GOVERNOR



GARY E. WESTCOTT
SECRETARY

GD

December 18, 2024

MEMORANDUM

TO: The Honorable Jason Parker
Sheriff of Webster Parish

FROM: *Gary E. Westcott*
Gary E. Westcott
Secretary

RE: "Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection conducted at Bayou Dorcheat Correctional Center on November 7, 2024. The facility continues to provide a secure, safe, and stable environment for DOC inmates in their custody.

However, during this reporting period, there were several months when Bayou Dorcheat Correctional Center did not meet the required 5% of the DOC inmate population to be drug tested. Also, there were some discrepancies concerning Key, Tool, and Utensil Control. The utensil inventory in the kitchen was found to be inaccurate. Warden Tucker advised that all discrepancies would be corrected immediately. DPS&C would like to encourage full compliance with BJG II-A-018 "Inmate Drug Testing" and II-D-001 "Key, Tool, and Utensil Control."

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

GEW/mk

Attachment

c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association
Scotty Tucker, Warden, Bayou Dorcheat Correctional Center
Seth Smith, Chief of Operations
Michele Dauzat, Warden, DWCC
Tyrone Mays, BJG Team Leader



BASIC JAIL GUIDELINES MONITORING REPORT

Annual

Ver. 11/28/2023 mwk

Facility Name: Webster – Bayou Dorcheat Correctional Center
BJG Team Leader & Monitors: Asst. Warden Tyrone Mays, BJG Team Leader (NE Region);
Colonel Vincent Coleman, BJG Team Leader
Facility Warden & Email Address: Warden Scotty Tucker / stucker@webstersheriff.org
Facility Staff: Asst. Warden Katie Douglas & Lt. John Lewis
BJG Inspection Date: 07 November 2024
Previous BJG Inspection Date: 22 August 2023
Operational Capacity: Webster – Bayou Dorcheat CC – 397, TWP -100 & S.O.
Treatment – 100
Count on the Day of Visit: 548

List Concerns or Issues from the previous BJG Monitoring Inspection:

I-C-004 Facility Furnishing & I-C-006 Operational Capacity

Count on the Day of Visit:

	# MALE	# FEMALE	TOTAL
Number of DOC Inmates	386	0	386
Number of Local Inmates	162	0	162
Number of Out of State Inmates	0	0	0
Number of Federal Inmates	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	548	0	548

Number of DOC Inmates that are:

Single Bunked	33
Double Bunked	330
Triple Bunked	22
Total	385

Number of DOC Inmates that are in Restricted Housing:

Single Bunked	1
Double Bunked	0
Triple Bunked	0
Total	1

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
September 2023	0	0	0	0
October 2023	2	0	0	0
November 2023	0	0	0	0
December 2023	4	0	0	0
January 2024	12	0	0	0
February 2024	1	0	0	0
March 2024	0	0	0	0
April 2024	2	0	0	0
May 2024	1	0	0	0
June 2024	1	0	0	0
July 2024	0	0	0	0
August 2024	1	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
September 2023	0	0	0	1	3
October 2023	0	0	0	0	6
November 2023	0	0	0	1	11
December 2023	0	0	0	0	5
January 2024	2	0	1	2	3
February 2024	0	0	0	0	7
March 2024	0	0	0	0	0
April 2024	0	0	0	0	4
May 2024	0	0	0	0	0
June 2024	0	0	0	0	0
July 2024	0	0	0	0	2
August 2024	1	0	0	0	5

GENERAL APPEARANCE, CLEANLINESS, AND COMMENTS OF THE FACILITY**Living Area**

- **Dorms** – The dorms were in good condition and odor free and clean. Personal property was neatly stored. No clutter was observed in the inmates living areas.
- **Cell Block** – The cells were clean and odor free. All of the inmates' personal property was neatly stored and the cells were clutter free.

Culinary/Dining: The culinary/dining area was clean. Culinary tools sign in sheet was not accurate. The inmates are escorted to the kitchen for meals. Temperature logs of the coolers and freezers were in place.

Bathrooms: The bathrooms were found to be clean, odor free, and in working order. Lavatory/showers have temperature controlled hot/cold water and the temperature is checked.

Yard Areas: There is ample space for inmates to exercise. The yard areas are well kept and free of debris.

Maintenance: Overall maintenance of the facility is good. There is a preventative maintenance program in place. Inventories of tools, flammables, and chemicals are kept thoroughly and up to date. Logbooks indicate that repair orders are submitted and noted problems are addressed in a timely manner.

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

- I-A-001 **Safety/Sanitation/Inspections (MANDATORY):** Compliant – Kitchen inspections are on file as well as water temperature logs. Monthly inspections are conducted at the facility. The last DHH inspection was on 4/22/2024. The last FM inspection was on 10/16/2024.
- I-C-001 **Emergency Plan (MANDATORY):** Compliant – The facility has submitted an emergency plan awaiting approval. Documentation reflects that all staff has been trained on emergency procedures.
- I-C-003 **Fire Safety/Code Conformance (MANDATORY):** Compliant – Last FM inspection was on 10/16/2024. There were no apparent deficiencies noted at the time of inspection.
- II-A-006 **Staff Log (MANDATORY):** Compliant – Documentation in logs by staff shows pertinent information on daily events, security rounds, and all other important activity throughout shifts tour of duty.
- II-A-007 **Counts (MANDATORY):**
- How many formal counts are conducted each shift? Day Shift – 3, Night Shift – 3
 - How many counts are conducted each day? 6 - Counts per day
 - Stickouts counts
 - How does the facility accomplish this? Staff conduct visual headcounts in the area the inmates are assigned.
 - Does this process ensure accountability and safe/secure operation of the facility?
Yes
- II-A-008 **Inmate Population Management System:** Compliant – If an inmate is transferred to another facility, all records are transferred with the inmate.
- II-A-010 **Admissions:** Compliant – Inmate personal property is inventoried and stored along with a signed inmate receipt. Current policies and procedures are in place.
- II-A-012 **Classification System:** Compliant
Does this facility have any trustees that work outside the secure perimeter? (Yes or No)
If yes,
 - What is their classification process to determine who is eligible for trustee status?
Inmates being screened for trustee status must meet the same criteria as utilized by DPS&C.
 - Does their classification process meet DPS&C, Corrections Services' criteria?
Yes
- II-A-016 **Photo Identification (MANDATORY):** Compliant – Inmate receives a photo ID upon intake process at the facility.

II-A-018

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

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
September 2023	25	550	5%	4
October 2023	22	572	4%	0
November 2023	22	573	4%	3
December 2023	24	567	4%	5
January 2024	45	556	8%	3
February 2024	44	573	7%	1
March 2024	52	576	9%	0
April 2024	36	573	6%	0
May 2024	57	608	9%	1
June 2024	36	591	6%	3
July 2024	14	582	2%	0
August 2024	35	559	6%	1

II-A-019

Inmate Transfers: Compliant – Policy and procedure in place and logs are maintained reflect inmate transfers.

II-A-020

Cell Checks (MANDATORY): Compliant – Documentation on file reflects that cell checks are within the guidelines. Policy and procedures are in file.

II-B-002-1

Use of Restraints for Pregnant Inmates: Compliant – Facility does not house female inmates.

II-C-001

Procedures for Searches: Compliant – Policy and procedure in place. Documentation on file for review to reflect shakedowns throughout different areas of the facility.

II-D-001

Key, Tool, and Utensil Control (MANDATORY): Compliant – A review of keys and tools was found to have accurate accountability in place with inventories and check-out systems. **Utensils inventory in the kitchen was found to be inaccurate.**

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? Inmate requests through classification, classification will review inmate requests to make sure all information is accurate and then forward it to the Warden for his/her review. If all information is accurate it is forwarded to DOC for processing.
- Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes

IV-A-003

Food/Dietary Allowances (MANDATORY): Compliant – Facility has cycle menus reviewed annually and approved by Registered Dietician Natalie Miller Lic# DT86620 Exp. 09/05/2026.

IV-A-006

Food Services Management (MANDATORY): Compliant – Policy and procedure in place. Ample time is permitted for meal consumption and timeframe between meals is compliant with guidelines. Inmates receive two hot meals per day and one cold.

IV-B-001

Plumbing Fixtures – Toilets & Washbasins (MANDATORY): Compliant – All inmates access to toilets and washbasins with temperature controlled hot/cold water at all times.

- IV-B-002 Plumbing Fixtures – Showers (MANDATORY):** Compliant – All inmates are able to shower every day. Water temperature logs indicate full compliance with water temperature requirements.
- IV-B-005 Personal Hygiene (MANDATORY):** Compliant – Documentation reflects indigent inmates personal hygiene items as needed.
- IV-C-001 Access to Care/Clinical Services (MANDATORY)** (Does the facility charge a co-payment? If so, approved by DPS&C?): Compliant – Co-pay is approved by DPS&C. All inmates are seen regardless of their ability to pay facility co-pay. Inmates are advised on how to obtain medical services.
- IV-C-003 Provision of Treatment (MANDATORY):** Compliant – On site health care available Doctor Fredrick Heard Lic# MD.021099 Exp. 8/31/2025 serves their Health care authority.
- IV-C-005 24 Hour Care (MANDATORY):** Compliant –Medical personnel on call 24 hours a day. If an emergency occurs inmates are transported to Ochsner–Health Shreveport and if life threatening matter they are transported to Minden Medical Center and stabilized prior to transport to Ochsner – Health Shreveport.
- IV-C-006-1 Pregnancy Management (MANDATORY):** Compliant – Facility does not house female inmates.
- IV-C-008 Annual TB Testing:** Compliant – TB testing is conducted on all inmates at no cost to the inmates.
- IV-C-009 Chronic Care Program (MANDATORY):** Compliant – Health records show that inmates with chronic issues receive continued care. Policy in place for chronic care. All other inmates are transferred to a DOC facility upon approval from DOC.
- IV-C-012 Access to Sick Call (MANDATORY):** Compliant – Sick call is accessible to all inmates Monday through Friday. Inmates have access to 24-hour emergency care by the on call nurse.
- IV-C-013 Infirmary Care:** Compliant – Facility does not have an in house infirmary. All inmates requiring these services to be transferred to a DOC facility.
- IV-C-013-1 Medical Releases** (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release): Compliant – Policies and procedures are in place related to medical releases according to DPS&C guidelines.
- IV-C-014 Suicide Prevention and Intervention (MANDATORY):** Compliant – Policy and procedure in place and approved by the facility HSI Approved Training Guten. Documentation is on file to support staff training on prevention and intervention.
- IV-C-015 Inmate Deaths (MANDATORY):** Compliant – There has been no deaths reported as of this date.
- IV-C-016 Notification:** Compliant – Policy and procedures are in place related to notification of family and visitation with an inmate admitted to ICU or trauma center according to DPS&C guidelines.
- IV-D-001 Healthcare Quarterly Meetings (MANDATORY):** Compliant – Quarterly meetings are conducted and documentation on file.

- IV-D-004 Confidentiality of Health Information/Individual Health Record:** Compliant – Completed documentation of completed consent forms are in place in file.
- IV-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY):** Compliant – Procedures and policy are in place. Documentation of training of staff of Narcan is on file.
- IV-D-007 Internal Review/Quality Assurance (MANDATORY):** Compliant – Facility has a policy in Place that has been approved by HCA, signed copy in file.
- IV-E-001 Alleged and Substantiated Sexual Assaults:** Compliant – Policy and procedure in are in place.
- V-A-004 Religious Programs:** Compliant – Inmates are provided opportunities for religious programming.
- V-A-005 Exercise & Recreation Access (MANDATORY):** Compliant – Inmates are allowed recreation daily with weather permitting.
- V-B-001 Programs and Services:**
- List all Certified Treatment Programs (Attach Form IS-B-8-b)
 - Steve Hoyle Intensive Substance Abuse Program – All Phases
 - Strengthening Families
 - R.O.A.R Opioid Treatment Program
 - Thinking for a Change
 - Ashland University Courses
 - HiSet
 - Sex Offender Treatment (Madison County Risk Psycho Social)
 - IC3
 - List all other Inmate Programs
 - Celebrate Recovery
 - Religious Services
- V-B-002 Educational Programming:**
- GED Program**
- | | |
|---------------------------|-----------|
| Number of GED Slots | <u>40</u> |
| Number of Participants | <u>35</u> |
| YTD Number of Completions | <u>7</u> |
- V-B-003 Substance Abuse Programs:** Compliant – Facility has policy and procedure in place.
- V-C-001 Releasing Inmates:** Complaint – Facility returns inmates personal property with obtaining a signed receipt. Medical department ensures inmates receives medication that required upon release. Inmates releasing from the facility receive information on community service.
- V-C-002 Regional Reentry Programs** (Are inmates released with two valid forms of identification?): Yes

- V-C-004 Parole Board Procedures:** Compliant – Documentation on file reflects Warden or designees are present during parole board hearings.
- VI-B-002 Grievance Process (MANDATORY):**
- Does the grievance process include at least two levels of review? Yes
 - Who is the designee at each level of review? 1st Level Warden , 2nd Level Sheriff
 - What is the specified time period for response at each level? 1st Level 40 days, 2nd Level 20 days
- VII-A-002 Weapons Training:** Compliant – Documentation of completed training on file.
- VII-B-010 Monthly Reporting:** Compliant – Monthly reports are submitted on time each month.
- VII-B-012 Proposed Expansions:** Compliant – No plans for expansions.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS

The staff at Bayou Dorcheat Correctional Center have a very good working relationship with each other. They were all professional towards each other and the inmates. When questioned, the staff were knowledgeable of their job duties. The officers' morale was good at the facility.

INMATE COMMENTS/MORALE/QUALITY OF LIFE

I spoke with several inmates and they were well mannered. They all stated that the food was good. The inmates' morale and quality of life were deemed as good. I spoke with several inmates throughout the facility and no significant complaints regarding their confinement were noted.

RECOMMENDATION

Warden Scotty Tucker has just recently been promoted to the Warden of Bayou Dorcheat Correctional Center. He stated that he and his staff are committed to maintaining compliance with BJC and providing a safe, secure, and stable environment for the inmates in their custody. Based on the walk-through of the facility and the review of the Basic Jail Guidelines the following was found to be non-compliant: II-A-018 Inmate Drug Testing for about four months. Also, there were some discrepancies concerning the utensils log-in and out inventory sheet in the kitchen. Warden Tucker advised that all discrepancies would be corrected immediately.



Jeff Landry
GOVERNOR

Office of State Fire Marshal

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

Inspection Report

Report # CB-24-036450-1

No Deficient/Cautionary Codes cited.



Chief Bryan J. Adams
FIRE MARSHAL

Location Information					
Inspection Type	Compliance Building Inspection		Inspection Date	10/16/2024 7:17:26 PM	
Structure ID	119210	No. of Buildings	4	Facility Code	J444
Capacity	444	Year Built	2002	Construction Type	Type IIB / (000)
Building/Trade Name			Address		
BAYOU DORCHEAT CORRECTIONAL CENTER			1455 BRAVO BOULEVARD - CAMP MINDEN, MINDEN, LA 71055		
Owner Information					
Owner Type	Name	Contact Phone	Contact Email		
Municipal Project	WEBSTER PARISH POLICE JURY	(318) 371-9199	STEELER3607@YAHOO.COM		
Address					
1455 BRAVO BLVD, MINDEN, LA 71055					
Tenant Information					
Name	Suite Number	Floor Number	Square Footage		
Occupancy Details					
Occupancy Type	Details				
Institutional	INSTITUTIONAL BUILDING TYPE: GROUP I-3 (DETENTION/CORRECTION); DETENTION/CORRECTION FACILITY TYPE: CONDITION 4				
Business					
Comments					
No apparent deficiencies noted at the time of inspection. Occupancy granted and acceptable for licensing Inmate count: A Dorm 99 B Dorm 98 C Dorm 96 D Dorm 94 E block 21 F Block 19 Twp 81 Twc 49 Total is 557 inmates. Max Occupancy: 597 Re-inspection and inspection was completed on 10/09/24					
Inspector Information					
Name: Brandon Lamkin	Badge Number: 726	Inspector Signature:			
Person to whom requirements were explained					
Name: Scott Tucker	Title: Warden	Signature:			

For questions regarding the contents of this report, please call:

(225) 587 5656



Jeff Landry
GOVERNOR

Office of State Fire Marshal

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

Inspection Report

Report # CB-24-036450-1

No Deficient/Cautionary Codes cited.



Chief Bryan J. Adams
FIRE MARSHAL

R. S. 40: 1621

Whoever fails to comply with any order issued by the Fire Marshal or his authorized representative under any provision of Part III, Chapter 7, Title 40 of the Louisiana Revised Statutes of 1950, R.S. 40:1569 excepted, shall be fined not more than five hundred dollars or imprisoned, for more than six months or both. Each day's violation of an order constitutes a separate offense and may be punished as such at the discretion of court.

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

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

RULES FOR APPEALING TO THE FIRE MARSHAL BOARD OF REVIEW

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



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Detention or Incarceration
Notice of Violations

Routine/Renewal

Permit Number 60-01-224	Permit Name Bayou Dorchest Correctional Center-224	
Name of Establishment Bayou Dorchest Correctional Center-224	Owner Name BAYOU DORCHEAT CORRECTION CENTER	
Address 1455 Bravo RD Minden, LA 71055	Date 04/22/2024	Time 01:40 AM

LAC TITLE 51 PART XVIII

NON-CRITICAL ITEMS: These items should be corrected by the next regular inspection or according to the compliance schedule (see below) established by this office.

Category	Code Reference	Description of Violations
Building Requirement	101	3 - The walls are in disrepair.
Building Requirement	101	6 - The ceilings are not in good repair.
Building Requirement	101	7 - There is peeling paint on the walls in the shower.
Handwashing Lavatories	101	16 - The hand lavatory is in disrepair, IN DORMS A, B, C AND D.

Comments:

COMPUTER ISSUES

VERBAL ACKNOWLEDGEMENT OF NOTICE OF VIOLATIONS BY KATIE DOUGLAS, PIC.

EMAIL REPORT TO CDOUGLAS@WEBSTERSHERIFF.ORG

Number Licensed For	Number in Attendance 600	License Anniversary 06/30/2021	
Sanitarian Name/Print Vera Brown	Phone # 318-371-3044	Sanitarian Signature <i>Vera Brown</i>	R.S. # 1989

The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to

Correct Critical Violations by

Correct Non-Critical Violations by

Signature of Recipient

Name/Title

KATIE DOUGLAS, ASSISTANT WARDEN

STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

INSTITUTION REPORT

Agency License No. N/A	Anniversary Month JUNE				
Name of Establishment BAYOU DORCHEAT CORRECTIONAL CENTER-224	Mailing Address				
Address 1455 BRAVO RD					
City, state, Zip Code MINDEN LA 71055					
Type of Facility JAILS 600					
Parish Webster	Date Inspected 04/22/2024				
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.					
VERA BROWN	<table border="1"><tr><td>1</td><td>9</td><td>8</td><td>9</td></tr></table>	1	9	8	9
1	9	8	9		



SHERIFF

WEBSTER PARISH

Jason Parker

P.O. Box 877

Minden, Louisiana 71058

(318) 377-1515

NOVEMBER 7, 2024

REGARDING VIOLATIONS FROM RECENT HEALTH DEPT. INSPECTION

NOTICE OF VIOLATIONS:

#1-FLOOR IS NOT MAINTAINED IN GOOD REPAIR

#2-FLOORS ARE NOT CLEAN INSIDE WALK-IN FREEZER

#3-WALLS/CEILINGS OR ATTACHED EQUIPMENT ARE NOT IN

GOOD REPAIR

THESE VIOLATIONS WILL BE ADDRESSED/CORRECTED BY THE END OF
THE YEAR.



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Retail Food
Notice of Violations

Routine/Renewal

Permit Number 60-0037662-1	Permit Name BAYOU DORCHEAT CORRECTION CENTER SITE 251218	
Name of Establishment BAYOU DORCHEAT CORRECTION CENTER	Owner Name BAYOU DORCHEAT CORRECTION CENTER	
Address 1455 BRAVO BLVD MINDEN, LA 71055	Date 09/13/2024	Time 11:30 AM

LAC TITLE 51 PART XXIII

CRITICAL ITEMS: These items MUST BE CORRECTED IMMEDIATELY (see compliance schedule below). Repeat violations may lead to enforcement actions or permit suspensions.

Category	Code Reference	Description of Violations
CROSS CONTAMINATION	1705	25 - 1705 - Raw animal food is not separated from ready to eat food, or is placed, stored or displayed above ready to eat food. EGGS [Corrected]

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
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3701	105 - 3701.6 - Floor is not maintained in good repair.
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3701	105 - 3701.5 - Floors are not clean. INSIDE WALK-IN FREEZER
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3703	106 - 3703.4 - Walls/ceilings or attached equipment are not in good repair. CEILING.

Comments:

"NOT ABLE TO OBTAIN PIC SIGNATURE DUE TO TABLET MALFUNCTION."

FSC# 73533 ROSELIND MILLER 9/27/23-8/13/27

EMAIL TO RMILLER@WEBSTERSHERIFF.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 facility that fails to correct the necessary sanitary code violations to be in compliance at the time of its follow up inspection (1st re-inspection). Re-inspections are required when there are five or more uncorrected non-critical violations and/or one or more uncorrected critical violations remaining at the conclusion of an inspection. The fee is only charged if the necessary violations are not corrected before the 2nd re-inspection and other subsequent re-inspections. Facilities can avoid this fee if the violations noted on the routine inspection report are corrected by, or during, the follow up inspection. If a fee is assessed, the \$150 fee is payable within 30 days' notice, and failure to pay shall result in revocation of the permit.

Sanitarian Name/Print Vera Brown	Phone # 318-371-3044	Sanitarian Signature 	R.S. # 1989
The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to		Correct Non-Critical Violations by	
Correct Critical Violations by		Signature of Recipient 	
Name/Title ROSELIND MILLER, MANAGER			



SHERIFF

WEBSTER PARISH

Jason Parker

P.O. Box 877

Minden, Louisiana 71058

(318) 377-1515

NOVEMBER 7, 2024

REGARDING VIOLATIONS FROM RECENT HEALTH DEPT. INSPECTION
DETENTION OR INCARCERATION:

#3-WALLS ARE IN DISREPAIR

#6-CEILINGS ARE NOT IN GOOD REPAIR

#7-PAINT PEELING ON THE WALLS IN THE SHOWERS

#16-HAND LAVATORY IS IN DISREPAIR IN DORMS A,B,C, AND D

THESE VIOLATIONS WILL BE ADDRESSED/CORRECTED BY THE END OF
THE YEAR.

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

Facility: Bayou Dorcheat Correctional Center

Date: 11/7/2024

Name of Program: Steve Hoyle Intensive Substance Abuse Program - all phases

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? ☒ Yes ☐ No

Program application process is consistent with DPS&C existing assessment and classification 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 inmates who apply.	☒ Yes	☐ No
Number of inmates accepted.	☒ Yes	☐ No
Number and type of services provided.	☒ Yes	☐ No
Inmate's completion/termination from program.	☒ Yes	☐ No

Is there a formal graduation ceremony for those who complete the program? ☒ Yes ☐ No

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

Asst. Warden Tyrone Mays

Monitoring Team Member or BJG Team Member/Leader

11/7/2024

Date

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

Facility: Bayou Dorcheat Correctional Center

Date: 11/7/2024

Name of Program: R.O.A.R. Opiod Treatment Program

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 ☐ No

Program application process is consistent with DPS&C existing assessment and classification 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 inmates who apply.	☒ Yes	☐ No
Number of inmates accepted.	☒ Yes	☐ No
Number and type of services provided.	☒ Yes	☐ No
Inmate's completion/termination from program.	☒ Yes	☐ No

Is there a formal graduation ceremony for those who complete the program? ☒ Yes ☐ No

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

Asst. Warden Tyrone Mays

Monitoring Team Member or BJG Team Member/Leader

11/7/2024

Date

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

Facility: Bayou Dorcheat Correctional Center

Date: 11/7/2024

Name of Program: Thinking For 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? ☒ Yes ☐ No

Program application process is consistent with DPS&C existing assessment and classification 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 inmates who apply.

☒ Yes ☐ No

Number of inmates accepted.

☒ Yes ☐ No

Number and type of services provided.

☒ Yes ☐ No

Inmate's completion/termination from program.

☒ Yes ☐ No

Is there a formal graduation ceremony for those who complete the program? ☒ Yes ☐ No

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

Asst. Warden Tyrone Mays

Monitoring Team Member or BJJ Team Member/Leader

11/7/2024

Date

Form IS-B-8-b
01 August 2024

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

Facility: Bayou Dorcheat Correctional Center

Date: 11/7/2024

Name of Program: Ashland University Courses

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? ☒ Yes ☐ No

Program application process is consistent with DPS&C existing assessment and classification 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 inmates who apply.	☒ Yes	☐ No
Number of inmates accepted.	☒ Yes	☐ No
Number and type of services provided.	☒ Yes	☐ No
Inmate's completion/termination from program.	☒ Yes	☐ No

Is there a formal graduation ceremony for those who complete the program? ☒ Yes ☐ No

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

Asst. Warden Tyrone Mays
Monitoring Team Member or BJG Team Member/Leader

11/7/2024
Date

Form IS-B-8-b
01 August 2024

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

Facility: Bayou Dorcheat Correctional Center

Date: 11/7/2024

Name of Program: HiSet

Date of Program Implementation: 2013

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 assessment and classification 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 inmates who apply.	☒ Yes	☐ No
Number of inmates accepted.	☒ Yes	☐ No
Number and type of services provided.	☒ Yes	☐ No
Inmate's completion/termination from program.	☒ Yes	☐ No

Is there a formal graduation ceremony for those who complete the program? ☒ Yes ☐ No

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

Asst. Warden Tyrone Mays

Monitoring Team Member or BJG Team Member/Leader

11/7/2024

Date

Form IS-B-8-b
01 August 2024

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

Facility: Bayou Dorcheat Correctional Center

Date: 11/7/2024

Name of Program: Sex Offender Treatment (Madison County Risk Psycho Social)

Date of Program Implementation: 2013

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 assessment and classification 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 inmates who apply.	☒ Yes	☐ No
Number of inmates accepted.	☒ Yes	☐ No
Number and type of services provided.	☒ Yes	☐ No
Inmate's completion/termination from program.	☒ Yes	☐ No

Is there a formal graduation ceremony for those who complete the program? ☒ Yes ☐ No

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

Asst. Warden Tyrone Mays

Monitoring Team Member or BJC Team Member/Leader

11/7/2024

Date

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

Facility: Bayou Dorcheat Correctional Center

Date: 11/7/2024

Name of Program: IC3

Date of Program Implementation: 2022

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 assessment and classification 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 inmates who apply.	☒ Yes	☐ No
Number of inmates accepted.	☒ Yes	☐ No
Number and type of services provided.	☒ Yes	☐ No
Inmate's completion/termination from program.	☒ Yes	☐ No

Is there a formal graduation ceremony for those who complete the program? ☒ Yes ☐ No

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

Asst. Warden Tyrone Mays
Monitoring Team Member or BJG Team Member/Leader

11/7/2024
Date

Sexual Assault BJC Pre Audit Questionnaire

JO-14V-E-001-a
08/10/2023

Facility Information
Name of Facility: <u>Payak Dorchester Correctional</u>
Physical Address: <u>1455 Bravo Blvd.</u>
City: <u>Minden</u> State: <u>La</u> Zip: <u>71055</u>
Warden: <u>Scott Tucker</u>
Current Population of Facility: <u>548</u>
Which population(s) does the facility hold? ☒ Females ☒ Males ☐ Both Females and Males
Number of staff currently employed by the facility who may have contact with inmates: <u>91</u>
Number of contracts with contractors who may have contact with inmates: <u>20</u>
Number of volunteers who have contact with inmates: <u>17</u>
In housing units, does the facility maintain sight and sound separation between youthful (18 and under) inmates and adult inmates? <u>Yes</u>
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology? <u>Yes</u>
Does the facility have medical and mental health services onsite? If no, provide offsite facility designated for services? <u>Yes</u>
Facility Requirements
Attach example of practice
BJG Guideline: Unit must have a written policy outlining a zero tolerance policy for sexual abuse, assault, and harassment, 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. <u>LSU</u> • 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).
BJG Guideline: Unit must report instances of sexual abuse, assault, and harassment, involving any DOC inmate to DPS&C Headquarters within 24 hours of the claim being made.