

DEPARTMENT OF PUBLIC SAFETY & CORRECTIONS
STATE OF LOUISIANA

JEFF M. LANDRY
GOVERNOR



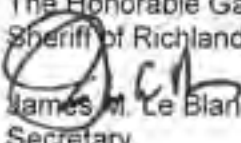
JAMES M. LE BLANC
SECRETARY

July 3, 2024

A handwritten signature in dark ink, appearing to be "JML", located to the right of the date.

MEMORANDUM

TO: The Honorable Gary Gilley
Sheriff of Richland Parish

FROM: 
James M. Le Blanc
Secretary

RE: "Basic Jail Guidelines" Monitoring Report

Please see the attached monitoring report regarding the Basic Jail Guidelines (BJG) annual inspection that was conducted at Richland Parish Detention Center on May 29, 2024.

Richland Parish Detention Center is to be commended for the number of completions (22) in the GED Program.

The facility continues to provide a secure, safe, and stable environment for DOC inmates in their custody. At this time DPS&C will continue with annual monitoring visits.

Thank you for your support of the BJG process.

JML/mk

Attachment

- c: Mike Ranatza, Executive Director, Louisiana Sheriffs' Association
Allen Cupp, Warden, Richland Parish Detention Center
Seth Smith, Chief of Operations
Michelle Dautat, Warden, DWCC
James Arnold, BJG Team Leader
Wayne Dautat, BJG Team Leader



BASIC JAIL GUIDELINES MONITORING REPORT

Annual

Ver. 11/28/2023 mwk

Facility Name: Richland Parish Detention Center
BJG Team Leader & Monitors: Deputy Warden James Arnold, BJG Team Leader
Facility Warden & Email Address: Warden Alan Cupp acupp@richlandso.org
Warden Tyler Wade twade@richlandso.org
Facility Staff: Warden Cupp, Warden Wade
BJG Inspection Date: May 29, 2024
Previous BJG Inspection Date: May 23, 2023
Operational Capacity: 782
Count on the Day of Visit: 638

List Concerns or Issues from the previous BJG Monitoring Inspection:

Count on the Day of Visit

	# MALE	# FEMALE	TOTAL
Number of DOC Inmates	633	5	638
Number of Local Inmates	0	0	0
Number of Out of State Inmates	0	0	0
Number of Federal Inmates	0	0	0
Number of ICE Detainees	0	0	0
TOTAL	633	5	638

Number of DOC Inmates that are:

Single Bunked	190
Double Bunked	289
Triple Bunked	109
Total	588

Number of DOC Inmates that are in Restricted Housing:

Single Bunked	4
Double Bunked	46
Triple Bunked	0
Total	50

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
May/2023	6	0	0	0
June/2023	7	0	0	0
July/2023	3	0	0	0
Aug/2023	3	0	0	0
Sept/2023	2	0	0	0
Oct/2023	1	0	0	0
Nov/2023	3	0	0	0
Dec/2023	3	0	0	0
Jan/2024	4	0	0	0
Feb/2024	4	0	0	0
Mar/2024	4	0	0	0
April/2024	5	0	0	0

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

Month/Year	Illicit Substance	Alcohol	Weapon	Cell Phone	Other
May/2023	5	0	6	3	6
June/2023	3	1	4	4	5
July/2023	2	0	6	3	2
Aug/2023	1	0	3	1	3
Sept/2023	1	0	5	3	2
Oct/2023	0	0	9	4	0
Nov/2023	3	1	3	5	5
Dec/2023	1	0	5	2	0
Jan/2024	1	0	8	3	3
Feb/2024	1	0	3	4	1
Mar/2024	3	0	9	4	2
April/2024	0	0	3	2	3

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

- **Dorms:** Dorms were clean and orderly, offender's personal property was properly stored in assigned lockers.
- **Cell Block:** Cells were orderly and clean.

Culinary/Dining: Kitchen and dining area were clean, and all offenders that were assigned to the culinary department received a pre-assessment prior to being assigned. Temperature logs were being maintained on cooler/freezers. Tool/utensil inventories were checked with a good check-out system in place. Last DHH Retail Food inspection was conducted on 12/5/23.

Bathrooms: Were clean and operational on the day of inspection.

Yard Areas: Areas were free of debris and well maintained. Ample space for offenders to exercise.

Maintenance: Area was clean and orderly. A review of inventories and tools revealed accurate accountability with a good check-out system in place.

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

I-A-001 Safety/Sanitation/Inspections (MANDATORY): Compliant- Inspections are being conducted daily, weekly, and monthly. Water temps are being recorded.

I-C-001 Emergency Plan (MANDATORY): Compliant- Facility has a Fire Marshal approved plan on file and the plan has been submitted to DPS&C.

I-C-003 Fire Safety/Code Conformance (MANDATORY): Compliant- Most recent FM is dated 1/18/24.

II-A-006 Staff Log (MANDATORY): Compliant- Staff logs of pertinent information shift activity, daily events, and security staff/supervisor rounds were reviewed and found in good order.

II-A-007 Counts (MANDATORY): Compliant

- How many formal counts are conducted each shift? Three
- How many counts are conducted each day? Six in a 24hr period.
- Stickouts counts
 - How does the facility accomplish this? Staff conduct visual counts.
 - Does this process ensure accountability and safe/secure operation of the facility? Yes

II-A-008 Inmate Population Management System: Compliant- Written policy and procedures are in place for offender case management. Offender files are transferred with offender to local/ DPS&C facility.

II-A-010 Admissions: Appropriate forms are completed and are in place to support compliance with this guideline. Offender personal property is inventoried and stored along with a signed receipt.

II-A-012 Classification System: Compliant

Does this facility have any trustees that work outside the secure perimeter? (Yes or No) Yes
If yes,

- What is their classification process to determine who is eligible for trustee status?
Facility utilizes the same criteria as DPS&C
- Does their classification process meet DPS&C, Corrections Services' criteria? Yes

II-A-016 Photo Identification (MANDATORY): Compliant- Offender receives a photo ID upon intake.

II-A-018 Inmate Drug Testing (MANDATORY): (List monthly since the previous BJG monitoring visit.)

Month/Year	# DOC Tested	Total DOC Pop	% Tested	# Positive
May/2023	33	632	19%	3
June/2023	50	681	14%	4
July/2023	28	661	24%	0
Aug/2023	57	681	12%	2
Sept/2023	33	670	20%	3
Oct/2023	40	681	17%	0
Nov/2023	41	673	16.4%	2
Dec/2023	85	651	8%	2
Jan/2024	57	651	11.4%	2

Feb/2024	71	678	10%	7
Mar/2024	50	692	14%	4
April/2024	37	661	18%	4

- II-A-019 Inmate Transfers:** Compliant- Policy and procedures are in place and facility logs are maintained to reflect offender transfers.
- II-A-020 Cell Checks (MANDATORY):** Compliant- Cell checks/security rounds are conducted within the guideline. Logs are maintained to reflect compliance.
- II-B-002-1 Use of Restraints for Pregnant Inmates:** Policy and procedures are in place, and documentation reflects the use of restraints on females.
- II-C-001 Procedures for Searches:** Documentation of shakedowns of offender's housing and property were on file.
- II-D-001 Key, Tool, and Utensil Control (MANDATORY):** Compliant- A review of keys, tools, and utensils was found to have an accurate accountability in place with inventories with a good check-out system in place.
- 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? Offenders request through classification, classification will review to ensure information is accurate and then forwarded to the Warden for review and then forwarded to DPS&C.
 - Does their restoration of good time application process meet DPS&C, Corrections Services' criteria? Yes
- IV-A-003 Food/Dietary Allowances (MANDATORY):** Compliant- Cycle menus are reviewed and approved by a Registered Dietitian. A tray/plate and utensil is provided for each hot meal.
- IV-A-006 Food Services Management (MANDATORY):** Compliant- Offenders are provided 3 hot meals per day, ample time is permitted for each meal consumption, and time lapse between meals is in compliance with the guidelines.
- IV-B-001 Plumbing Fixtures – Toilets & Washbasins (MANDATORY):** Compliant- All offenders have access to toilets/washbasins with temperatures controlled by hot/cold.
- IV-B-002 Plumbing Fixtures – Showers (MANDATORY):** Compliant- All offenders are able to shower daily, and water temperature logs indicate full compliance with the guidelines.
- IV-B-005 Personal Hygiene (MANDATORY):** Compliant- Indigent offenders are provided with personal hygiene items if the offender is not able to purchase such items.
- 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 has been approved by DPS&C. All offenders are seen regardless of their ability to pay facility co-pay.
- IV-C-003 Provision of Treatment (MANDATORY):** Compliant- Dr. Tommy Colvin exp. 12/31/24, dental Edward Hooten exp. 12/25 and Jeffery White Mental Health.

- IV-C-005 24-Hour Care (MANDATORY):** Compliant- When an offender's needs are not met at the facility, Richland Medical Center in Rayville, LA along with Ochsner LSU Monroe, LA will be utilized.
- IV-C-006-1 Pregnancy Management (MANDATORY):** Compliant- Policy and procedures are in place to accommodate any pregnant offender.
- IV-C-008 Annual TB Testing:** Compliant- TB Testing is conducted annually at no cost to the offender.
- IV-C-009 Chronic Care Program (MANDATORY):** Compliant- Only offenders who are stable through the use of medication are housed at this facility, all other offenders are transferred to a DOC facility upon approval from DOC.
- IV-C-012 Access to Sick Call (MANDATORY):** Compliant- Sick call is conducted 4 times per week. Offenders have access to 24-hour emergency care by the on-call nurse.
- IV-C-013 Infirmary Care:** Provisions are made to provide 24-hour care with physicians, dentists, and mental health.
- IV-C-013-1 Medical Releases (Medical Parole, Medical Treatment Furlough, and/or Compassionate Release):** Policy and procedures are in place related to medical releases according to DPS&C guidelines.
- IV-C-014 Suicide Prevention and Intervention (MANDATORY):** Compliant- Policy has been approved by Dr. Tommy Colvin, staff receives training on this topic and documentation was on file.
- IV-C-015 Inmate Deaths (MANDATORY):** Compliant- No deaths in this rating period.
- IV-C-016 Notification:** Compliant- Policy and procedures are in place related to notification of family and visitation with an offender admitted to an ICU or Trauma Center according to DPS&C guidelines.
- IV-D-001 Healthcare Quarterly Meetings (MANDATORY):** Compliant- Meetings are conducted quarterly with documentation on file.
- IV-D-004 Confidentiality of Health Information/Individual Health Record:** Complete and signed consent forms are in place in all offenders' files.
- IV-006-1 Emergency Assessment for Intoxication or Suspected Intoxication (MANDATORY):** Compliant- Policy and procedures are in place, facility utilizes Narcan, and staff training is being conducted on the use of Narcan.
- IV-D-007 Internal Review/Quality Assurance (MANDATORY):** Compliant- Facility has a policy in place that has been approved by a Health Care Authority.
- IV-E-001 Alleged and Substantiated Sexual Assaults:** Compliant- No Substantiated Sexual Assaults this rating period.
- V-A-004 Religious Programs:** Compliant- Facility utilizes volunteers.
- V-A-005 Exercise & Recreation Access (MANDATORY):** Compliant- Daily recreation is offered with weather permitting.

V-B-001 Programs and Services:

- List all Certified Treatment Programs (Attach Form IS-B-8-b)
Hi-Set
Celebrate Recovery
Partners in Parenting
Risk Management, Mind Altering Substance
Thinking for a Change
Inside and Out Dads
Understanding and Reducing Angry Feelings
Risk Management Phase 2
Ashland University
- List all other Inmate Programs

V-B-002 Educational Programming:

GED Program

Number of GED Slots	50
Number of Participants	45
YTD Number of Completions	22

V-B-003 Substance Abuse Programs: Facility offers AA/NA.

V-C-001 Releasing Inmates: Personal property of offenders is returned along with obtaining a signed receipt. Medical ensures offenders receive any required medication. Offenders who are released from the facility receive information on community resources.

V-C-002 Regional Reentry Programs (Are inmates released with two valid forms of identification?): Yes

V-C-004 Parole Board Procedures: Policy and procedures are in place, Warden or his designee is present for parole board hearings.

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

- Does the grievance process include at least two levels of review? Yes
- Who is the designee at each level of review? 1st level is the Captain, 2nd level the Warden
- What is the specified time period for response at each level? 1st level 10 days, 2nd level 30 days

VII-A-002 Weapons Training: Certificate is on file to show completion of initial and annual training.

VII-B-010 Monthly Reporting: Reports are submitted in a timely fashion.

VII-B-012 Proposed Expansions: No Plans for expansions at this time.

STAFF COMMENTS/MORALE/GENERAL OBSERVATIONS:

Richland Parish Detention Center staff morale on the day of the inspection was deemed to be good. Staff were dressed appropriately and each member that I came in contact with had identification on their person. Staff were very knowledgeable of their assigned duties and were aware of the emergency procedures.

INMATE COMMENTS/MORALE/QUALITY OF LIFE

During the walk-through offender's morale and quality of life were deemed to be good. Offenders I came in contact with voiced no concerns. Offenders were knowledgeable of how to file a grievance and the sick call process.

RECOMMENDATION

Warden Wade and Warden Cupp and their assigned staff continually strive to remain compliant with the Basic Jail Guidelines. The facility operates smoothly and efficiently. Based on my walk-through inspection of the facility and review of the BJG files, it is my recommendation that Richland Parish Detention Center remain on annual monitoring.



Jeff Landry
GOVERNOR

Office of State Fire Marshal
5181 Independence Blvd. Baton Rouge, LA 70806
(225) 925-4911 (800) 258-5452 Fax (225) 925-4241



Chief Bryan J. Adams
FIRE MARSHAL

Inspection Report

Report # CB-23-048722-2

Deficient/Cautionary Codes cited.

Location Information			
Inspection Type	Compliance Building Inspection	Inspection Date	1/10/2024 10:57:44 AM
Structure ID	209F33	No. of Buildings	5
Capacity	782	Year Built	1996
Building/Trade Name	Address	Facility Code	J371
RICHLAND DETENTION CENTER	456 HIGHWAY 15, RAYVILLE, LA 71268	Construction Type	Type IIB / (000)

Owner Information			
Owner Type	Name	Contact Phone	Contact Email
Municipal Project	RICHLAND PARISH SHERIFF'S OFFICE		TWADE@RICHLANDSO.ORG
Address			
708 JULIA STREET, RAYVILLE, LA 71269			

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 5
Factory/Industrial	TYPE OF FACTORY/INDUSTRIAL BUILDING:
Storage	TYPE OF STORAGE FACILITY: GROUP S-2 (LOW HAZARD); STORAGE MATERIALS:

Deficient and Cautionary Items		Status
1	NFPA 101 (1997) 14-5.1; NFPA 70 110.12 the utilities chapter for a detention occupancy provides standards consistent with the National Electrical Code, which prohibits exposed wiring within the facility. Currently, the Unit 1 mop room in the kitchen has exposed wiring running along the wall.	DEFICIENT (Correction Date: 1/22/2024)
2	NFPA 101 (1997) 14-3.3.2 the interior wall and ceiling finish in a detention occupancy must comply with the standard level of protection intended by its required use. Currently, there is broken ceiling tile in the unit 1 property room, which allows for smoke passage while also affecting the performance of the sprinkler head.	DEFICIENT (Correction Date: 1/22/2024)
3	NFPA 101 (1997) 14-2.2.2.2; 5-2.1.3.1 doors that are required for egress in certain areas must be opened readily from the egress side. Currently, there are dead bolts and/or hasp locks on the walk-in freezer door in unit 2, which prohibits the intended function of the emergency exit mechanism.	DEFICIENT (Correction Date: 1/22/2024)
4	Plan submittals required by state law to Office of State Fire Marshal for new construction or renovation. Currently, there is a newly renovated structure across from the detention facility being utilized as a training facility. The structure appeared to have new interior finishes along with a connected addition in the back, which included a kitchen/dining area. To ensure that compliance is met regarding the laws that govern fire safety regulations, plans are to be submitted to LSFM plan review.	DEFICIENT (Correction Date: 1/22/2024)



Jeff Landry
GOVERNOR

Office of State Fire Marshal

8181 Independence Blvd. Baton Rouge, LA 70806
(225) 925-4911 (800) 256-5462 Fax (225) 925-4241



Chief Bryan J. Adams
FIRE MARSHAL

Inspection Report

Report # CB-23-048722-2

Deficient/Cautionary Codes cited.

6	Per the most recent legislative update to the Louisiana Administrative Code, LAC 55V:1701 Effective 8/1/2021, all detention and correctional occupancies in the State of Louisiana shall be inspected by the Office of the State Fire Marshal at least annually. The inspection date on this report shall serve as the annual inspection for this facility.	CAUTIONARY
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Inspector Information		
Name: Daniel Ray Smith	Badge Number: 778	Inspector Signature: <i>D. Smith</i>
Person to whom requirements were explained		
Name:	Title:	Signature:

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

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.



Jeff Landry
GOVERNOR

Office of State Fire Marshal

8181 Independence Blvd. Baton Rouge, LA 70806
(225) 925-4911 (800) 256-6462 Fax (225) 925-4241

Inspection Report

Report # CB-23-048722-2

Deficient/Cautionary Codes cited.

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



Chief Bryan J. Adams
FIRE MARSHAL

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

RULES FOR APPEALING TO THE FIRE MARSHAL BOARD OF REVIEW

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



RICHLAND PARISH SHERIFF'S OFFICE

Gary Gilley, Sheriff and Tax Collector

Repairs for the Fire Marshall visit where completed on 1/18/24.
Attached are work orders for the repairs

A handwritten signature in black ink, appearing to read 'Gary Gilley'.

MAINTENANCE REQUEST

REPORTING OFFICER (PRINT NAME): S. Masley

REPORTING OFFICER SIGNATURE: _____

DATE REPORTED: 1/18/24

JOB LOCATION: Unit 2

COMPLETE DESCRIPTION OF REPAIR NEEDED:

exposed wires in mop closet of Unit 1
kitchen

DATE REPAIR COMPLETED: 1-18-24

REPAIR WORK COMPLETE BY MAINTENANCE:

Maint. Dept. Removed exposed wires
from mop closet in the kitchen

COMPLETED BY: S. Masley

Shannon Masley

MAINTENANCE SUPERVISOR SIGNATURE

MAINTENANCE REQUEST

REPORTING OFFICER (PRINT NAME): S. Mosley

REPORTING OFFICER SIGNATURE: _____

DATE REPORTED: 1-18-24

JOB LOCATION: Unit 1 property room

COMPLETE DESCRIPTION OF REPAIR NEEDED:

ceiling tile needs to be replaced in
unit 1 property room

DATE REPAIR COMPLETED: 1-18-24

REPAIR WORK COMPLETE BY MAINTENANCE:

Maint. Dept. replaced broken
ceiling tile in unit 1 property room
with new ceiling tiles

COMPLETED BY: S. Mosley

Shannon Mosley

MAINTENANCE SUPERVISOR SIGNATURE

MAINTENANCE REQUEST

REPORTING OFFICER (PRINT NAME): S. Mosley

REPORTING OFFICER SIGNATURE: _____

DATE REPORTED: 1-18-24

JOB LOCATION: Unit 1 Kitchen

COMPLETE DESCRIPTION OF REPAIR NEEDED:

Remove locks from freezer & cooler
in the kitchen

DATE REPAIR COMPLETED: 1-20-24

REPAIR WORK COMPLETE BY MAINTENANCE:

Maint. Dept. removed locks from
cooler & freezer in unit 1 kitchen
& installed new built-in safety release
locks for equipment

COMPLETED BY: S. Mosley

Shannon Mosley

MAINTENANCE SUPERVISOR SIGNATURE

MAINTENANCE REQUEST

REPORTING OFFICER (PRINT NAME): S. Mosley

REPORTING OFFICER SIGNATURE: _____

DATE REPORTED: 1-18-24

JOB LOCATION: Gunrange

COMPLETE DESCRIPTION OF REPAIR NEEDED:

Training Center / Gunrange needs a
fire evacuation plan.

DATE REPAIR COMPLETED: 1-20-24

REPAIR WORK COMPLETE BY MAINTENANCE:

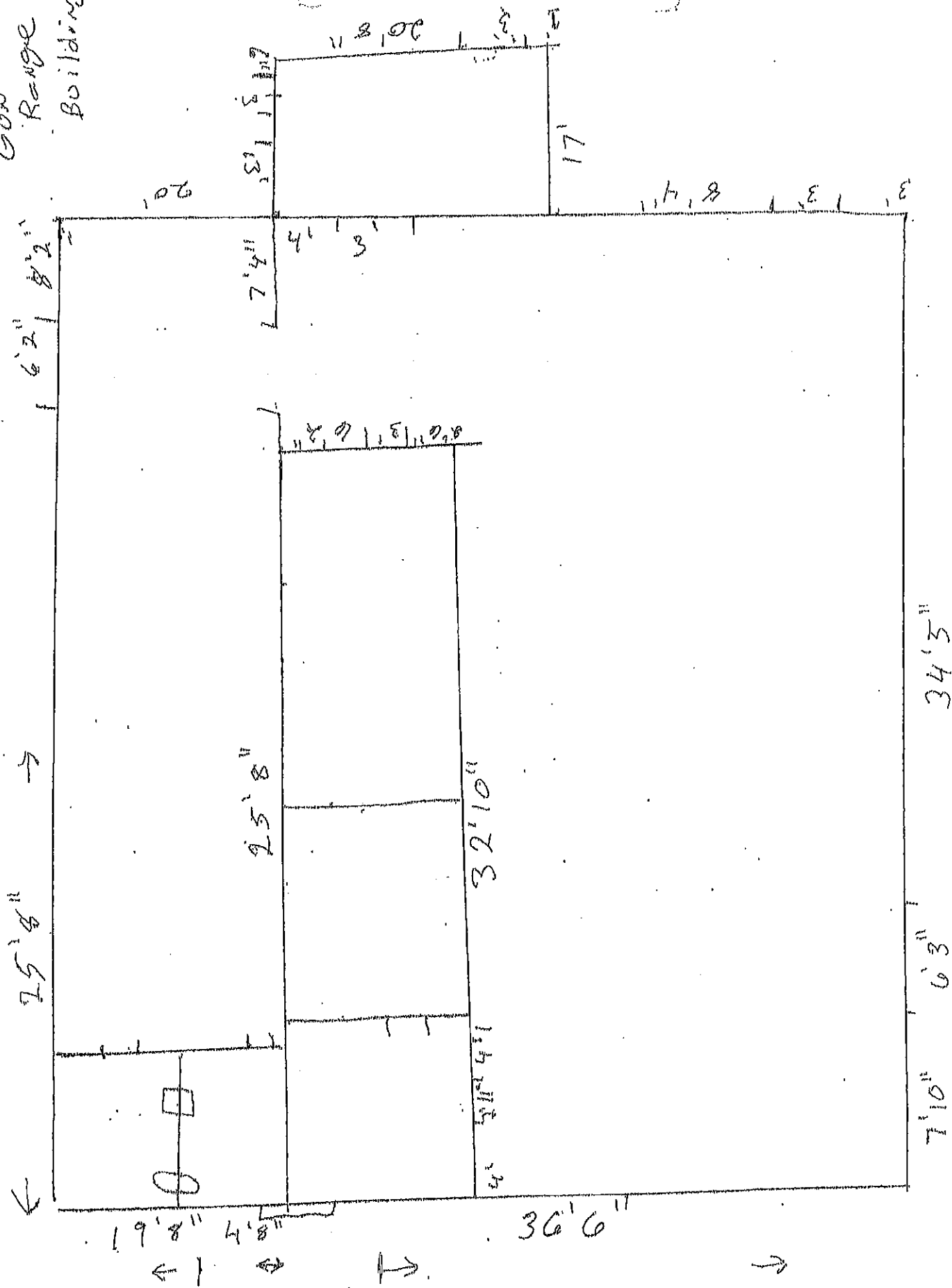
Market. Dept. had a Fire evacuation plan
created for the training center / Gun
Range.

COMPLETED BY: S. Mosley

Shannon Mosley

MAINTENANCE SUPERVISOR SIGNATURE

Gun
Range
Buildings



V:\2024\05\20240529

W:\2024\05\20240529



5181 Independence Blvd. Baton Rouge, LA 70806
(225) 525-4811 (800) 256-5452 Fax (225) 525-4241

PLAN REVIEW REPORT



Project Number: AR-24-005325

Project Name: RICHLAND PARISH SHERIFF'S OFFICE TRAINING BUILDING

Review Type: Architectural Review

Parish: RICHLAND

Record Status: Acceptable for Occupancy

Location: 474 HWY 15, RAYVILLE, LA 71269

Reviewer(s): Jennifer Morales

High Rise Building:

Project no. Floor(s): 1

Occupancy Separation Type:

Total Occupancy Square Feet: 500 Sqft.

Construction Type: V-B / V (200)

Additional Features:

Occupancy Type(s) & Sqft: Business (500 Sqft)

Renovation or Addition to an Existing Building (Alteration Level 2 (less than or equal to 50% of the building's physical value))

Facility Licensed by LDH Health Standards: NO

LSUCC Review: YES

TYLER WADE RICHLAND PARISH SHERIFF'S OFFICE
474 HWY 15
RAYVILLE, LA 71269

Project Number: AR-24-005325
Review Type: Architectural Review
Status: ACCEPTABLE FOR OCCUPANCY
Date Completed: 4/29/2024
Code Edition: 2021

In accordance with L.R.C. 40:1074 et seq., satisfactory compliance with the requirements of the law, rules, regulations and codes of the state that are submitted to the State Fire Marshal to uphold must be achieved before any work is performed. As such, a permit shall not be issued or construction or installation of the scope of work identified herein shall not commence until the status of this review is "Released" and the requirements of other state and local entities have been satisfied.

Project Description: REMOVE OF EXISTING BREAK ROOM			
Project Name: RICHLAND PARISH SHERIFF'S OFFICE TRAINING BUILDING		Address: 474 HWY 15, RAYVILLE, LA 71269	
Funding Type: Public Project	Within City Limits? NO	Number of Stories: 1	High Rise Building: NO
Occupancy Separation Type: 500	Total Occupancy Square Feet: 500	Project no. which Reported: 1	Construction Type: V-B / V (200)
Additional Features (If applicable):			
Occupancy Type(s) and Square Feet			
Occupancy Type: Business	Square Feet: 500	Details:	
Renovation			
Renovation or Addition: Alteration Level 2 (less than or equal to 50% of the building's physical value)		Date of Original Building Construction: 5/10/2009	
Date of Latest Major Renovation to this Building: 5/10/2009		Existing Square Feet: 682	
Additional Square Feet: 500		Renovated Square Feet: 500	
Previous Occupancy: Generator Installation:			
Facility Licensed by LDH Health Standards Section: NO			

Louisiana State Uniform Construction Code Review	
Review for the LSUCC performed by: Parish or Municipal Permitting Office	2nd Party Provider's Registration Number:
Individuals Involved in this Project	
Name: TYLER MANLEY WADE	Role: Owner
Address: 474 HWY 15, RAYVILLE, LA 71269	

Changes that are inconsistent with the reviewed documents are not authorized unless reviewed by this office for compliance with adopted codes, rules and laws. The changes must be submitted to this office by the Professional of Record where required by law, otherwise by the Owner, for review prior to construction and inspection. Minor changes may be submitted as supplemental information amended to this assigned project number. Changes that alter the scope of work, or that otherwise will require approval for review of the project, will require a complete resubmittal of the entire scope of work with application, revised permit, and applicable review fee.

This review ends in no way permit or authorize any violations or deviations from the specific requirements of the adopted codes, rules and regulations of the state. Construction permits must be issued at installation must commence within 180 days from the date of this "Released" Review for this submitter.

Occupancy of the project will not be permitted until a satisfactory inspection of the completed construction has been made by this office. Please allow at least two (2) weeks additional notice to schedule inspections.

Review Completed By		
Signature:		
Name: Jennifer Morales	Badge No.: 498	
Distribution List		
Name	Firm Name	Role

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5/29/2024 10:33:35 AM



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Detention or Incarceration
Notice of Violations

Follow-up

Permit Number 42-01-224	Permit Name Richland Parish Detention Center Unit 1-224	
Name of Establishment Richland Parish Detention Center Unit 1-224	Owner Name RICHLAND PARISH DETENTION CENTERS	
Address 474 Highway 15 Rayville, LA 71269	Date 12/07/2023	Time 10:20 AM

LAC TITLE 51 PART XVIII

Comments:

COPY OF REPORT EMAILED TO: TWADE@RICHLANDSO.ORG

Number Licensed For 360	Number in Attendance 332	License Anniversary 05/31/2023	
Sanitarian Name/Print Blake Bosely	Phone # 318-728-4441	Sanitarian Signature <i>Blake Bosely</i>	R.S. # 3233
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 <i>Alan Cupp</i>	
Name/Title ALAN CUPP/ASSISTANT WARDEN			



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

**Detention or Incarceration
Notice of Violations**

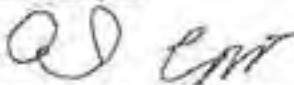
Follow-up

Permit Number 42-02-224	Permit Name Richland Parish Detention Center Unit 2-224		
Name of Establishment Richland Parish Detention Center Unit 2-224		Owner Name RICHLAND PARISH DETENTION CENTERS	
Address 456 Highway 15 Rayville, LA 71269	Date 12/07/2023	Time 10:40 AM	

LAC TITLE 51 PART XVIII

Comments:

COPY OF REPORT EMAILED TO: TWADE@RICHLANDSO.ORG

Number Licensed For 422	Number in Attendance 406	License Anniversary 03/31/2023
Sanitation Name/Print Blake Hensley	Phone # 338-728-4441	Sanitarian Signature 
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		R.S. # 3233 Signature of Recipient 
Name/Title ALAN CUPP/ASSISTANT WARDEN		

STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

INSTITUTION REPORT

Agency License No. N/A	Anniversary Month MAY				
Name of Establishment RICHLAND PARISH DETENTION CENTER UNIT 2-224	Mailing Address				
Address 458 HIGHWAY 15					
City, state, Zip Code RAYVILLE LA 71269					
Type of Facility JAILS 422 406					
Parish Richland	Date Inspected 12/07/2023				
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.					
BLAKE BOSELY <table border="1"> <tr> <td>3</td> <td>2</td> <td>3</td> <td>3</td> </tr> </table>		3	2	3	3
3	2	3	3		
LHS 46 (7/7/99)					

STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

INSTITUTION REPORT

Agency License No. N/A	Anniversary Month MAY				
Name of Establishment RICHLAND PARISH DETENTION CENTER UNIT 1-224	Mailing Address				
Address 474 HIGHWAY 15					
City, state, Zip Code RAYVILLE LA 71269					
Type of Facility JAILS 360 352					
Parish Richland	Date Inspected 12/07/2023				
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.					
BLAKE BOSELY	<table border="1"> <tr> <td>3</td> <td>2</td> <td>3</td> <td>3</td> </tr> </table>	3	2	3	3
3	2	3	3		
LHS 46 (R 7/99) © 1914					



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

**Retail Food
Notice of Violations**

Routine/Renewal

Permit Number 42-0001210-1	Permit Name RICHLAND PARISH DETENTION CENTER UNIT 1 KITCHEN	
Name of Establishment RICHLAND PARISH DETENTION CENTER UNIT 1	Owner Name RICHLAND PARISH DETENTION CENTERS	
Address 465 HIGHWAY 15 RAYVILLE, LA 71269	Date 12/05/2023	Time 10:05 AM

LAC TITLE 51 PART XXIII

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

Category	Code Reference	Description of Violations
FOOD - TIME/TEMPERATURE VIOLATIONS	1307	13 - 1307 - Food for hot holding and service was held at a temperature of less than 135°F. [COS][Repeat]
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. [COS]

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

Category	Code Reference	Description of Violations
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3701	105 - 3701.6 - Floor is not maintained in good repair. [Repeat]

Comments:

COPY OF REPORT EMAILED TO: TWADEN@RICHLANDSO.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
Blake BowelyPhone #
318-728-4441

Sanitarian Signature

R.S. #
3333

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

FRANK DEAR/ASSISTANT WARDEN



STATE OF LOUISIANA
DEPARTMENT OF HEALTH
OFFICE OF PUBLIC HEALTH

Retail Food
Notice of Violations

Kosina/Kongwa

Permit Number 42-0001220-1	Permit Name RICHLAND PARISH DET CENTER UNIT 2 KITCHEN	
Name of Establishment RICHLAND PARISH DET CENTER UNIT 2	Owner Name RICHLAND PARISH DETENTION CENTERS	
Address 465 HIGHWAY 15 RAYVILLE, LA 71269	Date 12/05/2023	Time 10:35 AM

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
FOOD PROTECTION	1907	61 - 1907.2 - Ice dispensing utensils were not stored in a clean protected location. [COS]
UTENSILS/EQUIPMENT/SINGLE SERVICE	2501	75 - 2501.2 - Non-food contact surfaces of equipment have an accumulation of dust, dirt, food residue and other debris (SHILVES)
STRUCTURAL/DESIGN/MAINTENANCE/PLUMBING	3701	105 - 3701.6 - Floor is not maintained in good repair.

Comments:

COPY OF REPORT EMAILED TO: TWADE@RICHLANDSO.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 Blake Bosly	Phone # 318-728-4441	Sanitarian Signature <i>Blake Bosly</i>	R.N. # 3233
--------------------------------------	-------------------------	--	----------------

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
FRANK DEAR/ASSISTANT WARDEN

Frank Dear



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

**Detention or Incarceration
Notice of Violations**

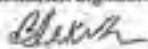
Follow-up

Permit Number 42-01-224	Permit Name Richland Parish Detention Center Unit 1-224		
Name of Establishment Richland Parish Detention Center Unit 1-224		Owner Name RICHLAND PARISH DETENTION CENTERS	
Address 474 Highway 15 Rayville, LA 71269	Date 12/07/2023	Time 10:20 AM	

LAC TITLE 51 PART XVIII

Comments:

COPY OF REPORT EMAILED TO: TWADE@RICHLANDSO.ORG

Number Licensed For 360	Number In Attendance 352	License Anniversary 05/31/2023
Sanitation Master/Print Blake Bostly	Phone # 318-728-4441	Sanitarian Signature  R.S.# 3233
The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to		
Correct Critical Violations by		Correct Non-Critical Violations by
Name/Title ALAN CUPP/ASSISTANT WARDEN		Signature of Recipient 



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

**Detention or Incarceration
Notice of Violations**

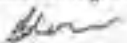
Follow-up

Permit Number 42-02-224	Permit Name Richland Parish Detention Center Unit 2-224		
Name of Establishment Richland Parish Detention Center Unit 2-224		Owner Name RICHLAND PARISH DETENTION CENTERS	
Address 456 Highway 13 Rayville, LA 71269		Date 12/07/2023	Time 10:40 AM

LAC TITLE 51 PART XVIII

Comments:

COPY OF REPORT EMAILED TO: TWADE@RICHLANDSO.ORG

Number Licensed For 422		Number in Attendance 406		License Anniversary 05/31/2023
Sanitarian Name/Print Blake Beverly	Phone # 318-723-4441	Sanitarian Signature 	R.S. # 3233	
The above mentioned violations were called to my attention and were explained to me in detail. I hereby agree to:				
Correct Critical Violations by		Correct Non-Critical Violations by		
Name/Title ALAN CUPP/ASSISTANT WARDEN		Signature of Recipient 		

MAINTENANCE REQUEST

REPORTING OFFICER (PRINT NAME): T. Wade

REPORTING OFFICER SIGNATURE: [Signature]

DATE REPORTED: 12/5/23

JOB LOCATION: Unit 1 Kitchen

COMPLETE DESCRIPTION OF REPAIR NEEDED:

Remove Tile From the Floor of Kitchen
Unit 1

DATE REPAIR COMPLETED: 12/11/23

REPAIR WORK COMPLETE BY MAINTENANCE:

Maint Dept Removed loose tiles from the
Kitchen Floor in Unit 1 to better maintain
Floor and reduce hazards.

COMPLETED BY: M. Gallard

[Signature: Shannon Mosley]

MAINTENANCE SUPERVISOR SIGNATURE



RICHLAND PARISH SHERIFF'S OFFICE

Gary Gilley, Sheriff and Tax Collector

Kitchen Maintenance Request

Reporting Officer: Warden T. Wade

Reporting Officer Signature: *[Signature]*

Date Reported: 12/05/2023

Job Location: Unit 2 Kitchen

Complete Description of Repair Needed:

"Non-food contact surfaces of equipment have accumulation of dust, dirt, food residue and other debris."

Date Repair Completed: 12/12/2023

Repair Work Completed by Kitchen Supervisor:

"Thorough cleaning of Non-Food contact surface equipment including shelves and liner installed."

Completed by: Dy. B. Boone

Kitchen Supervisor Signature: *[Signature]*

MAINTENANCE REQUEST

REPORTING OFFICER (PRINT NAME): T. Wade

REPORTING OFFICER SIGNATURE: _____

DATE REPORTED: 12/5/23

JOB LOCATION: Unit 2 Kitchen

COMPLETE DESCRIPTION OF REPAIR NEEDED:

Prepare Kitchen Floor in Unit 2 For anti-
slip equipment.

DATE REPAIR COMPLETED: 12/13/23

REPAIR WORK COMPLETE BY MAINTENANCE:

Maint. Dept. installed Anti Slip Safety Mats
for safety purposes

COMPLETED BY: _____

Shannon Masley
MAINTENANCE SUPERVISOR SIGNATURE

Form IS-B-8-b
05 November 2010

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

Facility: RPDC

Date: 5/14/2024

Name of Program: KiSET

Date of Program Implementation: Aug., 2012

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 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.	☒ 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.

Phyllis White
Monitoring Team Member or BJG Team Member/Leader

5/14/2024
Date

Form IS-B-8-b
05 November 2010

CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE

Facility: Richland Parish Detention Center

Date: May 14, 2024

Name of Program: HiSET

Date of Program Implementation: Aug, 2012

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 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.	☒ 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.

John Butler
Monitoring Team Member or BJG Team Member/Leader

5/14/2024
Date

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

Facility: Richland Parish Detention Center

Date: 5/20/2024

Name of Program: Celebrate Recovery

Date of Program Implementation: 2012

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 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.	☒ 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.

Butler / Justin Young
Monitoring Team Member or BJG Team Member/Leader

5/20/24
Date

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

Facility: Richland Parish Detention Center

Date: 5/20/2024

Name of Program: Partners In Parenting

Date of Program Implementation: Aug-2012

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 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.	☒ 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.

[Signature]
Monitoring Team Member or BJG Team Member/Leader

5/20/24
Date

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

Facility: Richland Parish Detention Center

Date: 5/20/2024

Name of Program: Risk Management: Mind Altering Substance Treatment (Phase I & II)

Date of Program Implementation: Aug-2012

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 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.	☒ 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.

[Signature]
Monitoring Team Member or BJG Team Member/Leader

5/20/24
Date

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

Facility: Richland Parish Detention Center

Date: 5/20/2024

Name of Program: Understanding & Reducing Angry Feelings

Date of Program Implementation: Aug. 2012

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 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.

☒ 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.

Butler
Monitoring Team Member or BJG Team Member/Leader

5/20/24
Date

CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE

Facility: RPDC

Date: May 14, 2024

Name of Program: Therapeutic Community for Males

Date of Program Implementation: 6-8-2020

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 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 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.	☒ 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.

Maria O. Lopez
Monitoring Team Member or BJG Team Member/Leader

5-14-24
Date

CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE

Facility: RPAC

Date: MAY 14, 2024

Name of Program: INSIDE OUT DADS

Date of Program Implementation: 6-8-2020

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 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 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.	☒ 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.

Mark O'Connell
Monitoring Team Member or BJG Team Member/Leader

5-14-24
Date

CERTIFIED TREATMENT AND REHABILITATION PROGRAM
CERTIFICATION OF CONTINUED COMPLIANCE

Facility: RPDC

Date: MAY 14, 2024

Name of Program: UNDERSTANDING AND RESOLVING ANGRY FEELINGS

Date of Program Implementation: 6-8-2020

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 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 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.	☒ 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.

Mani Ojeda
Monitoring Team Member or BJC Team Member/Leader

5-14-24
Date

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

Facility: RPOC

Date: MAY 14, 2024

Name of Program: RISK MANAGEMENT PHASE I AND II

Date of Program Implementation: 6-8-2020

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 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 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.	☒ 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.

Maura O'Connell
Monitoring Team Member or BJG Team Member/Leader

5-14-24
Date

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

Facility: Ashtland University, Richmond

Date: May 14, 2024

Name of Program: Ashtland University

Date of Program Implementation: AUGUST 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 offenders who apply.

Number of offenders accepted.

Number and type of services provided.

Offender's completion/termination from program.

☒ Yes	☐ No
☒ Yes	☐ No
☒ Yes	☐ No
☒ 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.

Daniel M. Hansen
Monitoring Team Member or BJG Team Member/Leader

5/29/2024
Date