Wisconsin Department of Corrections
Governor Scott Walker | Secretary Jon E. Litscher

Office of Detention Facilities

February 2, 2018

Sheriff Reginald Gill
Lafayette County Sheriff's Department
626 Main Street
P.O. Box 148
Darlington, WI 53530

Re: 2017 Jail Inspection

Dear Sheriff Gill:

Pursuant to Wisconsin Statute §301.37(3), an inspection of the Lafayette County Jail was conducted on September 27th, 2017. The inspection compared the facility to the Department of Corrections Administrative Code Chapter DOC 350, applicable State Statutes, and best correctional practices. The process included a review of records, dialogue with staff and inmates, and a walkthrough of the building to assess the safety, sanitation, adequacy, and fitness of the facility. This correspondence will summarize the findings of the inspection.

SUMMARY OF FACILITY

The Lafayette County Jail was originally constructed in 1979. The building consists of three linear housing units and two Huber dormitories. The facility has a maximum rated capacity of 25 adult inmates and is not approved to hold juveniles. There were 11 inmates at the jail on the date of the inspection.

INMATE RESOURCES

- **EDUCATION** – There are no in-house educational opportunities.
- **SUPPORT GROUPS** – There are no in-house support groups.
- **LIFE SKILLS PROGRAMMING** – There are no in-house programming opportunities.
- **RELIGIOUS SERVICES** – A nondenominational service is held weekly (individual consultations can also be arranged).
- **VISITATION** – Depending on their classification, inmates are generally allowed three 30-minute visits per week. Visits are conducted through a non-contact booth.

- **COMMISSARY** – Canteen is provided by Stellar Services and inmates are generally allowed to order once a week.

- **RECREATION** – There are no recreational opportunities outside of the housing unit dayrooms.

- **READING MATERIALS** – Inmates have access to reading materials on a weekly basis.

CHANGES

The following is a list of changes since last year's inspection:

- Retirement of longtime Jail Administrator Mary Paisley (replaced by Sgt. Darrell Morrissey).
- Switched to Spillman for a jail management system.
- Switched to Stellar Services for inmate canteen.
- Added a Corporal position for the jail and dispatch.
- [redacted]
- Replaced the dayroom televisions.
- Tinted the visitation and dispatch windows (for enhanced security).
- Installed a key FOB system at the doorway to administration.
- Updated the jail's policy and procedure manual.
- Started utilizing blister packs and pre-printed medication administration records.
- Purchased a new medication storage cart.

GOALS

The following is a list of goals for the upcoming year:

- [redacted]
- Assess and replace plumbing mechanisms as needed.
- Make the cell windows translucent by frosting them over.
- Become more efficient with Spillman.

SUMMARY OF INSPECTION

I met with Lafayette County administrative, security, healthcare, and food service staff to conduct the annual inspection. The site visit included a review of facility records and documentation, dialogue with staff and inmates, as well as a walkthrough of the detention areas. The attached checklist details my findings as they relate to the Department of Corrections Administrative Code Chapter DOC 350 and applicable State Statutes.

In summary, the overall appearance of the jail was in satisfactory condition. A spot check of facility conditions and mechanical devices noted the following issues:

- ☑ Inmates reported the hot water in cells B2, B3, and C2 were not working (this has since been addressed).
- ☑ The wall by the toilet in receiving #2 needs cleaning.
- ☑ There was some defacing on the bunks in right Huber. Additionally, the air vent in the bathroom needs cleaning.

- ☑ There is a missing ceiling panel in left Huber.

My observations during the inspection revealed cordial and professional interactions between staff and inmates (I heard positive comments from inmates regarding the level of staff supervision). The only common-themed complaint was specific to a lack of hot water (which has since been addressed). The overall positive climate is particularly noteworthy given how antiquated the building is and how limited staffing resources are. A lack of adequate housing options continues to compromise the jail's classification system and will be an ongoing issue until a new facility is built. In addition to the housing shortfalls, there is a lack of jail space for the following areas:

- ☑ Medical Office: There is no designated space for a health services unit. In the event the nurse needs to see an inmate, the consult usually takes place in the booking room. This can impact jail operations as the booking room is used for multiple purposes. [redacted]

- ☑ Receiving Cells: The facility only has two receiving cells which are used for multiple purposes (e.g. bookings, suicide watches, medical observation, discipline, administrative confinement, etc.). That is not sufficient bed space for all of those needs (nor were those cells designed for long-term housing).

- ☑ Programming Space: As a result of not having adequate space and resources for programming, the jail does not offer any in-house educational instruction, support groups, or life skills improvement opportunities for the inmates.

- ☑ Recreation Space: There are no recreational opportunities outside of the housing unit dayrooms.

- ☑ Storage Space: This is an ongoing concern, as property is stored in every available area within the jail.

In light of these challenges, jail administration and staff are to be commended for the positive feedback and inmate climate.

VIOLATIONS

The following violations were noted during this inspection process:

- ☑ **Administrative Code DOC 350.03(6)** defines what a "dayroom" is and how it can be used. Contrary to the code, it was reported there were a few occasions during this inspection period in which an inmate slept on a dayroom floor due to overcrowding (populations records verified the facility exceeded its maximum rated capacity on multiple dates). It is recommended a thorough review of the jail's classification system/housing plans is conducted to establish a population threshold which prevents individuals from having to sleep on the floor and ensures the proper separation of inmates by security classification.

- ☑ **Administrative Code DOC 350.12(9)** requires that all issued and allowed clothing items are laundered twice weekly. It was reported during the inspection that male uniforms were only getting laundered once a week (administration reported this has since changed to twice a week).

- ☑ **Administrative Code DOC 350.12(15)** requires inmate property storage containers to be sanitized before reuse. It was reported during the inspection that this was not a consistent practice (administration reported this has since changed).

- ☑ **Administrative Codes DOC 350.16(7) and DOC 350.16(8)** require that medications administered to or refused by an inmate shall be documented. A spot check of the medication administration records revealed noncompliance, as multiple unexplained gaps were observed on the MAR's.

- ☑ **Administrative Codes DOC 350.18(1)(a) and 350.18(1)(b)** require that all inmates are personally observed by security staff at staggered intervals not to exceed 60 minutes in length (15 minutes for those inmates on a suicide watch). A spot check of records revealed noncompliance, as multiple overages were observed for both types of wellness checks.

- ☑ **Administrative Code DOC 350.18(4)** requires formal counts to be completed and documented at least three times per day, with a minimum of one count per shift. A spot check of records revealed noncompliance, as not all of the dates reviewed had documented counts.

- ☑ **Administrative Code DOC 350.24(3)(d)** requires a due process hearing to be held within seven days of being notified of a major jail rule violation (unless the inmate waives their right to a hearing). A spot check of major disciplines revealed noncompliance, as not every inmate was afforded a due process hearing (administration reported this has since changed). As was discussed during the inspection closeout, administration is encouraged to utilize standard due process forms for both minor and major disciplines which encompass the procedural requirements of DOC 350.24.

MISCELLANEOUS

The following miscellaneous issues were also noted during this inspection process:

- ☑ **Health Appraisals** – A spot check of records verified general compliance; however, one of the appraisals reviewed had not been completed within 14 days.

- ☑ **Suicide Watches** – A spot check of records verified general compliance; however, there were two potential issues with one of the incidents reviewed: 1) it was unclear whether mental health was notified within 12 hours of initiating the suicide watch; and 2) although a mental health worker subsequently conducted an onsite face-to-face assessment, no formal recommendation was provided to jail staff. It is recommended the 'Suicide Watch Documentation' form reflect all of the procedural requirements of DOC 350.17(10).

- ☑ **Facility Searches/Shakedowns** – A spot check of records verified general compliance; however, not all housing units are getting searched on [redacted] basis.

- ☑ **Staff Training** – As was discussed during the inspection closeout, please ensure that all staff training is formally documented. Additionally, it was reported jail staff did not receive annual strip search training (in accordance with WI Stat. §968.255).

APPROVAL

The Lafayette County Jail is approved to hold adult inmates with a rated capacity of 25. This approval is contingent upon correction of the noted violations and the continued compliance with Chapter DOC 350 and applicable State Statutes. I would like to thank your staff for their assistance and cooperation during my visit. Please do not hesitate to contact my office should you have any questions regarding this report.

Professionally,

Nathan White, Inspector
DEPARTMENT OF CORRECTIONS

Cc: Troy Loeffelholz, Chief Deputy
Sgt. Darrell Morrissey, Jail Administrator
Kristi Dietz, ODF
File

CHAPTER DOC 350 INSPECTION DOCUMENT

COUNTY: Lafayette **DATE:** 9/27/17

INMATE HOUSING AND CLASSIFICATION

DOC 350.05 (3) (d) In jails that are constructed or substantially remodeled on or after September 1, 2014, double cells shall have a floor area of at least 25 square feet of unencumbered space per occupant.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☐	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☒	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.06 (3) (d), DOC 350.07 (4) In jails that are constructed or substantially remodeled prior to September 1, 2014, to be used for double occupancy, a cell shall have a floor area of at least 70 square feet. NOTE: ODF recognizes current code does not reflect the "grandfather" provision that prior to March 1, 1990, a cell shall have a floor area of at least 54 square feet.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☐	Policy and procedure manual review	☒	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: The Lafayette County Jail was constructed in 1979.

DOC 350.20 Double celling. If approved by the department, the jail shall have policies and procedures relating to double celling.

DOC 350.20 (1) The county board and sheriff shall determine jointly the adequate staffing needs, including support staff and services that are required to ensure the health, safety and security of the jail staff and inmates when using cells for double occupancy. The joint determination shall be in writing and signed by the representatives of the county board and the sheriff and shall be filed with the department. The written joint determination shall remain in effect until rescinded or amended by mutual written agreement of the county board and sheriff. Unless there is adequate staff as agreed upon by the county board and sheriff, double celling may not occur.

The written agreement between the County Board and Sheriff is on file with the department and contains the following elements:

- The County Board and Sheriff agree to the stated staffing levels
- The staffing levels include security staff, health care staff, support and service staff and administrative staff
- The staffing pattern is detailed in the written agreement
- The agreement is signed by representatives of the County Board and the Sheriff

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
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☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policy #001 addresses double celling. The most recent staffing agreement was signed on 3/19/01.

DOC 350.20 (2) Inmates housed in the same cell shall have the same custody classification and be properly segregated as required under s. 302.36, Stats.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.20 (3) For male and female housing areas, at least one cell or 15% of the jail's total number of cells, whichever is greater, shall be maintained for single occupancy.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☒	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.20 (4) Receiving cells may not be used for double occupancy.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.21 Inmate classification. All jails shall meet the requirements set forth in s. 302.36 Stats. The sheriff shall establish and maintain an objective prisoner classification system to determine prisoner custody status and housing assignment, and develop eligibility criteria for prisoner participation in available work assignments, programs and community service projects. The jail shall have policies and procedures relating to classification.

DOC 350.21 (1) Description of the objective prisoner classification system, including the identification and training of staff authorized to classify prisoners, initial classification and reclassification procedures and prisoner appeal process.

DOC 350.21 (2) Eligibility criteria for prisoner participation in available work assignments, programs and community service projects.

DOC 350.21 (3) Review of prisoner classification decisions.

- The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination.
- A written policy is provided to all correctional staff detailing classification process.
- Policy clearly identifies personnel authorized to classify inmate housing assignments.
- Personnel assigned to complete inmate classification assignment receive formal training.
- A process is in place for supervising personnel to complete a secondary review of reclassification and appeals.
- Sufficient housing exists to meet classification guidelines to male and female inmates.
- Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
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☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policies #103 and #103.1 address inmate classification. The jail utilizes a point-additive system for an objective classification instrument (completed records were observed). Given the facility layout and limited bed space, there are occasional issues with the proper separation of inmates by security level (especially females). As a reminder, inmates housed in the same cell or in a dormitory must be of the same security classification.

SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following: (a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.

- All inmates are personally observed during each physical inspection.
- In housing units of multiple cells, officers are encouraged to complete physical inspections from within the housing unit.

DOC 350.18 (2) Supplemental observation. A video monitoring system may be used to supplement but not replace personal observations.

DOC 350.18 (3) Documentation. Each observation shall be documented.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☒	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policies #400 and #500 address inmate wellness checks.

A spot check of records for hourly wellness checks revealed noncompliance, as several of the dates reviewed contained checks which exceeded 60 minutes. It should be noted inmates reported seeing staff at least once an hour when questioned during the inspection.

A spot check of records for suicide watches revealed noncompliance, as several of the observation logs reviewed contained wellness checks which exceeded 15 minutes in length.

DOC 350.18 (4) Inmate counts. Description of the system for physically counting inmates. Formal counts shall be completed and documented at least three times per day, with a minimum of one count per shift.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☒	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #400 addresses inmate counts. A spot check of records revealed noncompliance, as not all of the dates reviewed had documented counts.

DOC 350.18 (5) Security inspections. Descriptions of procedures for conducting and documenting facility and area searches.

- Facility and area searches are completed and documented.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #401 addresses facility searches. A spot check of records verified general compliance; however, not all housing units are getting searched on a [redacted] basis.

DOC 350.18 (6) Inmate searches. Descriptions of procedures for conducting and documenting inmate pat down, strip and body cavity searches.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policies #402 and #403 address inmate searches. It was reported jail staff did not receive annual strip search training (in accordance with WI Stat. §968.255).

DOC 350.18 (7) Door and lock inspections. Monthly inspections shall be made to determine if all jail doors and locks within and to the secure perimeter of the facility are in good working order. Each inspection shall be documented.

- The remote security controls of doors and locks are all operable.
- All manufacturing doors, locks and releases are repaired in a timely manner.
- The jail staff demonstrate a proficiency in operating all locks, doors and releases.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #800 addresses monthly door and lock inspections. A spot check of records verified compliance. As a reminder to staff, please ensure the date of the inspection is documented on each monthly report.

DOC 350.18 (8) Key control. Control and use of jail keys, including all of the following:

(a) All issued keys shall be inventoried and accounted for at shift change
(b) All keys shall be stored in a secure area and accessible in the event of an emergency
(c) Inmate are not permitted to handle or utilize jail keys.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #700 addresses key control. Staff become familiar with key use and storage during orientation and jail training (a daily key control log was observed).

DOC 350.18 (9) Weapons control. Introduction, availability, control, inventory, storage and use of firearms, chemical agents, electronic control devices or other related security devices and specification of the level of authority required for their access and use.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policy #805 addresses weapons control.

DOC 350.18 (10) Tools and sharps control. Introduction, availability, control, inventory, storage and use of tools and sharps within the facility.

- Documentation of the control and inventory is maintained

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #806 addresses tool and sharps control.

DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

a) Local fire department inspection requirements under sub. (5).
b) Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
   - Fire extinguishers are properly maintained with recorded time and date of inspection.
   - Fire extinguishers are properly placed, secured and easily accessible to staff.
   - A fire extinguisher suitable for grease fires is provided in the kitchen.
   - Jail staff can demonstrate proficiency in the use of fire protection equipment.
c) Training of staff in equipment use and the evacuation of inmates
   - Staff training is documented.
d) A written evacuation plan
   - Jail staff can articulate or demonstrate the evacuation routes and policies of the jail.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policies #800 - #803 address fire safety. Fire extinguishers and SCBA's were observed in the facility (staff demonstrated the ability to operate an air pack). A spot check of fire extinguisher tags revealed they are being serviced regularly.

DOC 350.19 (3) The evacuation route developed as part of the evacuation plan under sub. (2)(d) shall be posted in a conspicuous place for jail staff in the jail.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.19 (4) Fire safety evacuation and other procedures shall be practiced or simulated by all jail staff at least once every 12 months. Each practice or simulation shall be documented.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: While not formally documented, it was reported all staff were required to operate an air pack this year. As was discussed during the inspection closeout, please ensure all applicable fire safety training is documented.

DOC 350.19 (5) The facility shall be inspected by the local fire department at least once every 12 months and a record thereof shall be maintained.

- The fire inspection report supports that the facility conforms to applicable fire safety codes.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Documentation from the Darlington Fire Department verified compliance, with an inspection completed on 6/9/17.

DOC 350.19 (6) There shall be monthly inspections of the facility to ensure compliance with safety and fire prevention standards. Inspections shall be documented.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: As a reminder to staff, please ensure the date of the inspection is documented on each monthly report.

DOC 350.22 Use of Force. The jail shall have policies and procedures for the use of force.

DOC 350.22 (1) Jail staff may use physical force against an inmate only if force is necessary to change the location of an inmate or to prevent death or bodily injury to the staff member, the inmate or someone else, unlawful damage to property, or the escape of an inmate from the jail. Staff may use only the amount of force reasonably necessary to achieve the objective for which force is used. Corporal punishment of inmates is forbidden.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policy #100 addresses use of force. A spot check of records verified compliance.

DOC 350.22 (2) Any staff member who has used force to control an inmate or inmates shall submit a written report to the sheriff, jail administrator or the staff member's supervisor describing the incident. The report shall include all known relevant facts and be submitted by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee.

- Supervisory review is conducted and documented.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.23 Use of restraints. The jail shall have policies and procedures governing the use of restraints and control devices.

DOC 350.23 (1) Restraint devices are never used as punishment and are not applied longer than necessary.

- Inventories are conducted and documented.

DOC 350.23 (2) When an inmate is mechanically restrained for non-routine purposes, a written report must be completed by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee. Documentation shall include the reason for use, duration of use and corresponding wellness checks.

- Supervisory review is conducted and documented

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policy #101 addresses use of restraints.

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)

(a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
(b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
(c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
(d) Staff member may impose a minor discipline if found that violation occurred
(e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
(f) Inmate is notified of right to appeal and of appeal procedure.
(g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

DOC350.24 (3) Discipline for major violation. (See code for specific language.)

(a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
(b) Written report to supervisor within 24 hours of incident
(c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
(d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
  1. Impartial hearing officer or committee (not involved in incident)
  2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
  3. Inmate's right to present witnesses. Reason for absence of witness documented.
  4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
  5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
  6. Written decision stating discipline administered. Copy to inmate.
  7. Inmate is notified of right to appeal and appeal procedure
  8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.

e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

350.24(4) Classification. An inmate may be evaluated for custody classification following the imposition of discipline.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☒	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #102 addresses inmate discipline. A spot check of major disciplines revealed noncompliance, as not every inmate was afforded a due process hearing (administration reported this has since changed). As was discussed during the inspection closeout, administration is encouraged to utilize standard due process forms for both minor and major disciplines which encompass the procedural requirements of DOC 350.24.

HEALTH CARE

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

- Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.
- The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.
- The identity of the person completing the health screening form is documented.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policies #300 and #302 address the intake screening process. Jail staff complete an intake screening form for inmates booked into the facility (a spot check of records verified compliance). Each intake screening form is reviewed by the jail nurse.

DOC 350.13 (5) A health appraisal that is to be completed within 14 days after arrival at the facility unless a health appraisal has been completed by health care staff within the previous 90 days. The health appraisal shall be completed by health care staff in accordance with protocols established by the responsible physician.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of records verified general compliance; however, one of the appraisals reviewed had not been completed within 14 days.

DOC 350.14 Inmate health care. There shall be sufficient equipment, material, space and supplies for the performance of health care services in a confidential manner.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☐	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: As noted in previous inspections, there is no designated space for a health services unit. In the event the nurse needs to see an inmate, the consult takes place in the booking room. This can impact jail operations as the booking room is used for multiple purposes.

DOC 350.14 (1) The sheriff shall provide or secure necessary medical and mental health treatment and emergency dental care for inmates in custody.

- Jail provides a specific form for inmates to request medical assessment or treatment.
- All inmate requests for medical care are reviewed by health care staff.
- The dispositions of the inmate medical requests are documented by health care staff members.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.14 (3) Health care staff shall be in compliance with state and federal licensure certification and registration. Verification of compliance shall be maintained at the facility.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of records verified compliance.

DOC 350.14 (4) Medical records shall be kept separate from other records and shall be maintained in a confidential manner in accordance with s. 146.81 to s. 146.83, Stats., and any other applicable state or federal laws.

- Medical record accessibility is limited to medical staff, the jail administrator and the administrator's designees as appropriate.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #300 addresses inmate medical records. Medical records are securely stored within the booking room.

DOC 350.14 (6) Officers shall receive documented annual training on health care policies and procedures, medications and health screening at the time of admission.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: While not formally documented, it was reported all staff received training on healthcare policies and procedures this year (to include medications). As was discussed during the inspection closeout, please ensure all applicable medical training is documented.

DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care.

DOC 350.15 (1) Documentation of health referrals made or health care provided.

DOC 350.15 (2) Maintenance of documents in an inmate's confidential file.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.15 (3) Names, addresses and telephone numbers of health care providers or agencies who have agreed to provide emergency and routine health care services for inmates.

- Contact information is available to staff.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.15 (4) Referral of an inmate to jail health care staff or to other agencies that provide health care.

- Health care referrals are made and documented.
- Staff are knowledgeable about the health care referral process.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.15 (5) Designation of staff who have authority to make health care decisions, including emergency medical and dental care.

DOC 350.15 (6) Non-emergency health care, including the use of an inmate's personal physician.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.15 (7) Schedule of inmate access to routine medical care.

- The schedule of inmate access to medical care is provided to inmates in writing via handbook, posted notice, inmate rule and regulation list, or other appropriate means.
- An alternative means for inmates to access medical care is provided if the inmates are unable to read or write.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Nursing services are provided by a contracted county employee (it was reported the nurse is generally onsite twice a week). The medical director (Dr. Solverson) is contracted from Family Health. Access to care is outlined in the jail rules. If an inmate cannot read or write, the process will be explained to them.

DOC 350.15 (8) Provision for inmates with chronic medical conditions.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.15 (9) Procedure for processing inmate medical requests on a daily basis.

- Inmate medical requests are documented on an official medical request form.
- Written disposition of medical requests are retained in inmate's confidential medical file.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Inmates are able to submit healthcare requests on a daily basis (completed requests were observed).

DOC 350.15 (10) Documentation in an inmate's confidential medical file of any referral and identification of the services provided, including emergency services.

- Health care services provided or refused are documented in the inmate's confidential medical file.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.15 (11) Provision of special diet if ordered by a qualified health care professional.

- Special diets ordered by a qualified health care professional are documented in the inmate's confidential medical file.
- The jail health care providers, food service providers, and correctional staff are notified of special diets ordered by a qualified health care professional.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #902 addresses medical diets. Alleged food allergies and medical diets are reviewed by the health authority. Ordered medical diets are noted in the inmate's file and communicated with the food service staff (special diet order forms were observed in the kitchen and in indivdual medical files).

DOC 350.15 (12) Pregnancy management.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.15 (13) Maintenance of agreements between the jail and providers of health care services.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.

Wisconsin State Statute 302.388 Prisoner medical records.

(2) HEALTH SUMMARY FORM.

(a) The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.

(b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.

1. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
2. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
3. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.

(bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.

(f) Receiving institution intake staff may make a health summary form available to any of the following:

1. The prison's or jail's medical staff.
2. A prisoner's healthcare provider.
3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
4. In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #306 addresses health transfer summary forms. A spot check of records verified general compliance.

DOC 350.15 (15) Communicable disease and infection control. Policies and procedures relating to communicable disease and infection control shall contain all of the following components:

(a) Provision of treatment and supervision of inmates during isolation or quarantine under s. 252.06(6)(b), Stats.
(b) Documentation of the need for isolation or quarantine under s. 252.06(6)(b), Stats., in the inmate's confidential medical file.
(c) Provision of laboratory screening for inmates who may have been exposed to a communicable disease if ordered by medical personnel.
(d) Provision for handling bio-hazardous waste and decontaminating medical and dental equipment in accordance with regulations.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policy #304 addresses communicable diseases.

DOC 350.15 (16) Detoxification and management of intoxicated inmates.

- Appropriate housing and supervision is provided.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.16 Control and administration of medications. The jail shall have policies and procedures relating to the control, delivery and administration of prescription and non-prescription medications.

DOC 350.16 (1) A qualified health care professional shall prescribe medications and order treatments.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policies #300, #308, and #312 address inmate medications.

DOC 350.16 (2) Designated trained staff may administer or deliver prescribed doses of medication at prescribed times. Annual documented training shall be provided to jail staff that deliver medications.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: The jail nurse is responsible for setting up the medications each week and jail staff are responsible for delivering them to inmates (med pass occurs four times a day or as directed). It was reported all new staff receive an orientation with the jail nurse on this process. While not formally documented, it was reported all jail staff received

training on medications during this inspection period. As was discussed during the closeout, please ensure all applicable medical training is documented.

DOC 350.16 (3) Determination by appropriate personnel that all medications brought in by inmates or other persons for an inmate are necessary.

- Verification of prescription medication is performed by a health care provider or an appropriately trained designee.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.16 (4) All medications brought into the jail shall be inventoried and placed in secure storage.

DOC 350.16 (5) Any medications kept at the jail shall be stored in a locked drug cabinet that is not accessible to inmates.

- The storage of inmate medications makes them readily identifiable.
- Medications that require refrigeration are kept in a separate, medical refrigerator, unless the medications are secured in a separate, locked container stored in a refrigerator inaccessible to inmates.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: All medications brought into the facility are documented (through the booking process and medication verification forms). [redacted]

DOC 350.16 (6) Administration or delivery of prescription and nonprescription medications to inmates.

- Personnel authorized to administer medications are listed in the current policy and procedure manual and accessible to all jail staff.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.16 (7) Medication administered or delivered to an inmate shall be documented, including who prescribed the medication, who administered or delivered the medication, and the date and time of administration or delivery.

DOC 350.16 (8) All refusals of recommended or prescribed medications by an inmate shall be documented. A health care professional shall monitor the inmate in accordance with requirements of s. 302.384, Stats.

- All medication documentation is complete, accurate, and legible.
- The name of the pharmacist or qualified health care professional, the full (not abbreviated) name of the medication, the dosage and frequency, the date and time of administration or delivery, and any special instructions or comments are documented for each prescription medication.
- The medication administration and delivery records are reviewed by the health care provider and/or jail administrator or designee for completeness, accuracy, and legibility.
- There are no unexplained gaps in the documentation and inmate refusals of medication are clearly indicated and documented.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☒	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: A spot check of medication administration records revealed noncompliance, as multiple unexplained gaps were observed.

DOC 350.16 (9) Return of an inmate's medication inventoried at admission.

DOC 350.16 (10) Inventory or disposal of unused medications upon the inmate's release or transfer.

- The return of an inmate's medication is documented.
- Unused medication is disposed of by a health care provider, transferred with the inmate, or returned to a pharmacy.
- Established protocols regarding the disposal of narcotic medications, including witness presence, are followed.
- Documentation of the disposition of the medication is retained in the inmate's medical file.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

HIGH RISK SUPERVISION

DOC 350.17 Suicide prevention. The jail shall have policies and procedures relating to the supervision and housing of inmates who may be at risk of seriously injuring themselves.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policies #500 and #501 address suicide prevention.

DOC 350.17 (1) Obtaining documented information from the arresting or transporting agency to assess an inmate's potential for suicide or self-harm.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: This information is documented on the 'Authorization to Hold' form.

DOC 350.17 (2) Intake screening of inmates that includes interview items and staff observation related to potential suicide risk.

- Intake screening is performed on each new inmate.
- The answers to all screening questions are documented.
- The screening form is legible, accurate, and complete, including detailed narratives when necessary.
- Appropriate follow-up questions are asked and answers recorded, when suicide risk is indicated.
- Medical or mental health care professionals review intake screening reports when risk is indicated.
- A secondary security review of intake screening reports for completeness, accuracy, legibility, consistency, appropriateness of housing assignments, appropriateness of classification and risk assessments is conducted.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: As a part of the intake screening process, mental health questions are asked of each inmate (completed forms were observed). During this screening process, if the inmate's answers or behavior suggest a risk of suicidal ideation, then that automatically generates a new protocol for further assessment and evaluation. All intake screenings are reviewed by healthcare staff.

DOC 350.17 (3) Procedure for placement of an inmate on suicide watch. Policies and procedures relating to the procedure for placing an inmate on suicide watch shall include all of the following components:

a) Immediate notification to designated supervisory staff if an inmate is identified as a suicide risk.
b) Designation of housing areas and security precautions for inmates who are placed on suicide watch.
c) Description of monitoring procedures for inmates on suicide watch, including frequency and documentation of wellness checks.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Inmates placed on a suicide watch are generally housed in a receiving cell.

DOC 350.17 (4) Identification of trained persons who may assess an inmate's level of suicide risk.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Through Northwest Connections, Lafayette County Human Services provides mental health services on an as needed basis.

DOC 350.17 (5) Notification to qualified mental health professionals within 12 hours of placement of a potentially suicidal inmate on suicide watch. Assessment by a qualified mental health professional shall be completed as soon as practicable.

- Recommendations and decisions from qualified mental health professional are documented and maintained at the jail.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of records verified general compliance; however, it was unclear in one of the incidents reviewed whether mental health was notified within 12 hours (documentation did not reflect an initial notification).

DOC 350.17 (6) Identification of qualified mental health professionals who are authorized to remove an inmate from a suicide watch status after an on-site face-to-face assessment.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of records verified general compliance; however, it appeared in one suicide watch placement that a formal recommendation was not provided by the mental health worker (even though an onsite face-to-face assessment was completed).

DOC 350.17 (7) Frequency of communication between health care and jail personnel regarding the status of an inmate who is on suicide watch.

- A clear and reliable means of communicating information between correctional staff members regarding inmates who are suicide risks is utilized.
- All communication between jail staff, administration, and medical/mental health care providers is documented, including names of those involved, summary of content of discussion, and actions taken.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Applicable information is disseminated between shifts and documented.

DOC 350.17 (8) Intervention protocol during an apparent suicide attempt, including life-sustaining measures.

- Staff demonstrate a working knowledge of first aid and emergency response measures.
- Staff are familiar with the location and effective use of emergency response equipment.
- Staff received training on emergency response, including use of emergency response equipment within the past evaluation period.
- The actions taken in response to a suicide in progress or suicide threat are documented.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: First aid equipment and cutdown tools are maintained in the facility (staff are able to identify where they are located).

DOC 350.17 (9) Identification of persons to be notified in case of attempted or completed suicides.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.17 (10) Documentation of actions and decisions regarding inmates who are suicide risks, including all of the following:

(a) Individual initiating the suicide watch.
(b) Date and time watch was initiated.
(c) Reason watch was initiated.
(d) Name of supervisor contacted.
(e) Date and time supervisor contacted.
(f) Name, date, and time of referral to mental health professional.
(g) Written documentation from the mental health professional removing an inmate from a suicide watch including name, date and time.
- Supervisory review of the relevant documentation is completed.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of records verified general compliance (the majority of this information is captured on the 'Suicide Watch Documentation' form).

DOC 350.17 (11) Implementation of 2 hours of annual documented staff training regarding suicide prevention and identification of risk factors.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of training records verified compliance.

DOC 350.17 (12) Access by staff to debriefing and support services.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.17 (13) Implementation of an operational review following a suicide or significant suicide attempt.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.25 Administrative confinement. In this section, "administrative confinement" means a non-punitive, segregated confinement of an inmate in his or her cell or other designated area to ensure personal safety and security within the jail. The jail shall have policies and procedures outlining the administrative confinement proces.

DOC 350.25 (1) An inmate may be placed in administrative confinement if the inmate's continued presence in the general population meets one of the following:

(a) Presents a substantial risk of physical harm to the inmate, another person or property.
(b) Threatens the security and order of the jail.
(c) Inhibits a pending disciplinary investigation.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☒ Sample of facility records reviewed	☐ Other (specify):
☐ Non-compliant	☐ Sight confirmation by inspector	
☐ Not reviewed	☒ Verbal confirmation by facility staff	

Comments: Policy #105 addresses administrative confinement placements. A spot check of records verified general compliance.

DOC 350.25 (2) A jail staff member shall inform his or her supervisor of any incident that may require administrative confinement of an inmate and the supervisor shall determine whether to place the inmate in administrative confinement. In the absence of his or her supervisor, a jail staff member may place an inmate in administrative confinement. The staff member's supervisor shall review that placement decision within 24 hours. This review shall include evaluation of inmate's classification.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☐ Sample of facility records reviewed	☐ Other (specify):
☐ Non-compliant	☐ Sight confirmation by inspector	
☐ Not reviewed	☐ Verbal confirmation by facility staff	

Comments:

DOC 350.25 (3) An inmate's progress in administrative confinement shall be reviewed by a supervisor at least once every seven days. The supervisor shall determine when the inmate no longer presents a threat to the safety, security and order of the jail and may be released to the general population. Each review shall be documented.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☐ Sample of facility records reviewed	☐ Other (specify):
☐ Non-compliant	☐ Sight confirmation by inspector	
☐ Not reviewed	☐ Verbal confirmation by facility staff	

Comments:

DOC 350.25 (4) The reason an inmate is placed in administrative confinement and the length of time the inmate remains in administrative confinement shall be documented in the inmate's file.

- The inmate is informed of the reasons and conditions of the inmate's Administrative Confinement.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☐ Sample of facility records reviewed	☐ Other (specify):
☐ Non-compliant	☐ Sight confirmation by inspector	
☐ Not reviewed	☐ Verbal confirmation by facility staff	

Comments:

RECORDS AND REPORTING

DOC 350.10 Records and reporting.

DOC 350.10 (1) Register of inmates. Each jail shall keep a register of all inmates. The register shall contain identifying information on each inmate, including name, residence, age, sex, race, court order, time and cause of placement and placing authority, and time of release and releasing authority. If an inmate escapes, the time and manner of the escape shall be recorded in the register.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☐	Policy and procedure manual review	☒	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.10 (2) Storage of records. Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☐	Policy and procedure manual review	☒	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☒	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: In summary, the overall appearance of the jail was in satisfactory condition. A spot check of facility conditions and mechanical devices noted the following issues:

- Inmates reported the hot water in cells B2, B3, and C2 were not working (this has since been addressed).
- The wall by the toilet in receiving #2 needs cleaning.
- There was some defacing on the bunks in right Huber. Additionally, the air vent in the bathroom needs cleaning.
- There is a missing ceiling panel in left Huber.

DOC 350.12 Sanitation and Hygiene. The jail shall have policies and procedures relating to sanitation and hygiene.

DOC 350.12 (1) Facilities are required to be clean and in good repair.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #904 addresses sanitation and hygiene.

DOC 350.12 (2) Blankets shall be laundered monthly and before reissue.

DOC 350.12 (3) Sheets, pillowcases and mattress covers shall be changed and washed at least weekly and before reissue.

DOC 350.12 (4) Clean towels shall be issued to each inmate twice a week.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Inmates and staff reported blankets are laundered at least once a month, bedding at least once a week, and towels twice a week.

DOC 350.12 (5) Mattresses shall be provided where there is a need for overnight detention. Each mattress and each pillow, if used, shall be covered with a fire retardant, waterproof, easy-to-sanitize material. Mattresses and pillows shall be kept in good repair and in a clean and sanitary condition. The sheriff shall provide adequate bedding. Mattresses shall be cleaned and sanitized before reissue.

DOC 350.12 (6) Suppliers of mattresses and pillows shall be provide evidence to the sheriff that the products are fire retardant, waterproof, and easy to clean.

DOC 350.12 (7) Mattresses shall be of proper size to fit the bed.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of mattresses verified compliance.

DOC 350.12 (8) The sheriff shall provide an inmate whose clothing has been confiscated with adequate and appropriate clothing, including footwear, for use while the inmate is in custody. Footwear shall be cleaned and sanitized before reissue.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Necessary clothing is provided at intake.

DOC 350.12 (9) Laundry schedule shall be established to meet daily needs. All issued and allowed clothing items are laundered twice weekly.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☒	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: It was reported during the inspection that male uniforms were only getting laundered once a week (administration reported this has since changed to twice a week).

DOC 350.12 (10) Vermin and pests are controlled with an effective, documented program. Containers of poisonous compounds used for exterminating rodents or insects shall be prominently and distinctly labeled for easy identification of contents. Poisonous compounds shall be stored independently and separately from food and kitchenware in a locked area not accessible to inmates.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.12 (11) After 24 hours, inmates shall be provided with towels and toilet articles sufficient for the maintenance of cleanliness and hygiene, including toothpaste and toothbrush, soap and comb. Basic feminine hygiene materials for females and toilet paper shall be provided to inmates upon request. There shall be no common use of toothbrushes, combs, shaving materials or feminine hygiene materials.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.12 (12) Inmates are provided cleaning materials daily. Tables used for common use and meals shall be kept sanitized. Door traps used for passing meals or other items shall be kept sanitized.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Inmates reported having access to cleaning supplies on a daily basis.

DOC 350.12 (13) Safety and sanitation inspections of the jail are completed and documented at a minimum of once monthly.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of records verified compliance. As a reminder to staff, please ensure the date of the inspection is documented on each monthly report.

DOC 350.12 (14) Common use grooming tools are disinfected and cleaned before reissue and are stored in a secure area.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.12 (15) Property storage containers shall be sanitized before reuse.

- Property storage containers may include bags, bins, totes and lockers.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☒	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: It was reported during the inspection that inmate property storage containers were not always getting sanitized before reuse (administration reported this has since changed).

DOC 350.12 (16) Trash is removed daily from all dayrooms.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.12 (17) Hazardous waste shall be disposed of according to government regulations.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

INMATE SERVICES

DOC 350.26 Grievance Process. The jail shall have policies and procedures relating to an inmate grievance process and ensure it is available to all inmates and includes at least one level of appeal.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☒	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #104 addresses the inmate grievance process.

DOC 350.27 Legal Access. The jail shall have policies and procedures to address inmates' access to the courts, their attorneys, and legal materials.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policies #701, #702, #707, and the jail rules address legal access.

DOC 350.28 Indigence. The jail shall have policies and procedures to address indigence.

DOC 350.28 (1) The jail shall establish definitions and procedures to define indigence.

DOC 350.28 (2) Inmates' access to health care, programming and essential services is not precluded by inability to pay.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☒	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Policies #300, #301, and #702 address inmate indigence.

DOC 350.29 Mail. The jail shall have policies and procedures relating to written contact between inmates and their families, friends, attorneys, the court system, government officials and others.

DOC 350.29 (1) Provision for staff inspection and reading of non-privileged incoming and outgoing mail.

- Staff demonstrate a working knowledge of the procedures for mail inspection.

DOC 350.29 (2) Provision for the limited inspection of incoming and outgoing privileged mail.

- Staff demonstrate a working knowledge of the definition of privileged mail and the procedures for inspecting it.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #702 addresses inmate mail. Mail procedures are explained in the inmate rules.

DOC 350.29 (3) Delivery of all non-privileged and approved privileged incoming mail.

- Inmate mail is delivered to inmates in a timely manner.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.29 (4) Inventory and disposition of contraband items found in mail.

- Contraband items are inventoried and documented.
- Contraband is promptly turned over to supervisory staff.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.29 (5) Provision of postage to indigent inmates.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.29 (6) Provision for notifying inmates when outgoing or incoming mail is withheld.

- A non-delivery of mail form is completed and provided to the inmate when mail is confiscated, destroyed, or rejected.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation.

DOC 350.30 (1) Establishment of a visiting schedule for family, friends, attorneys, and others. Attorney visits shall be allowed during reasonable hours, as long as security and daily routine are not unduly interrupted.

DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times.

- Accommodations are made for visits to occur at times other than scheduled visiting times.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #701 addresses inmate visitation. Visitation procedures are explained in the jail rules. Inmates are generally afforded three 30-minute visits each week. Visits are conducted through a non-contact booth. Per the jail rules, special visits may be requested by submitting a written request to the sheriff or jail administrator.

DOC 350.30 (3) Documentation of all visits through a visitor log or register.

- All non-jail staff members who enter the jail are documented on the visitor's log or other appropriate register.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.30 (4) Establishment of a search policy of visitors and their possessions.

- Personal contact visitors are subject to a search procedure.
- Program workers and volunteers are subject to strict guidelines regarding personal items, carry-in equipment and compliance with jail policies.
- Law enforcement/Community Corrections/ Legal visitors are required to adhere to safe correctional practices limiting carry-in items and may be subject to search.
- Jail staff consistently apply visitation and search standards to all non-jail staff.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.30 (5) Posting of visitation policies and procedures, including visitation schedule, in a place readily accessible to visitors and inmates.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: The visitation schedule is posted in the inmate rules and in the public lobby.

DOC 350.30 (6) Establishment of a search policy for inmates before and after each visit.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.31 Programs and services. The jail shall have policies and procedures relating to the provision of inmate programs and services.

DOC 350.31 (1) Use of community resources, contract providers, and volunteers authorized by the sheriff.

DOC 350.31 (2) Notification to inmates of availability, eligibility, and schedules.

DOC 350.31 (3) Conducting criminal background checks on all volunteers, community resources, and contract providers.

DOC 350.31 (4) Orientation and training on facility operations for all volunteers.

DOC 350.31 (5) Educational programming for inmates who are under 18 years of age consistent with the requirements of the Department of Public Instruction.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #705 addresses inmate programs and services.

DOC 350.32 Religious programming. Inmates shall have the opportunity to participate in practices of their religious faith consistent with existing state and federal statutes. The jail shall have policies and procedures relating to religious programming.

DOC 350.32 (1) Identification of religious organizations and clergy willing to conduct religious services in the facility.

DOC 350.32 (2) Notification to inmates of the schedule of religious services available in the jail.

- Staff demonstrate a knowledge of the procedure for assessing and responding to inmate requests for religious services.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policies #703 and #705 address religious programming. A nondenominational service is available each week (inmates are also afforded individual consultations).

DOC 350.32 (3) Identification of religious items that may be kept on an inmate's person or in the cell.

- If religious items are permitted, the policies are consistently applied throughout the jail.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.32 (4) Conducting criminal background checks on members of a religious organization and clergy.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.32 (5) Orientation and training on facility operations for all volunteers.

- Documentation of the orientation and volunteer agreement is on file.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.33 Recreation. The jail shall have policies and procedures relating to recreation.

DOC 350.33 (1) Identification of the recreational activities that are available.

DOC 350.33 (2) Schedule of recreational activities.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #706 addresses inmate recreation. There are no recreational opportunities outside of the housing unit dayrooms.

DOC 350.33 (3) When and where available, at least one hour of daily exercise and recreation is outside the cell or outdoors.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.34 Publications. The jail shall have policies and procedures relating to access to publications.

DOC 350.34 (1) Provision of publications of general interest for inmates such as books, newspapers and magazines.

DOC 350.34 (2) Identification of publications that are prohibited for inmates because their content creates a security risk.

- Reading material restrictions are posted or otherwise accessible to inmates.

DOC 350.34 (3) Inspection of publications brought by visitors for inmates if the jail allows visitors to bring in reading materials.

- There are limitations on the volume of personal reading materials that can be kept in the housing area, and these limitations are enforced consistently throughout the jail.
- All reading materials allowed to be brought in by visitors are subject to search.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policies #702 and #707 address publications. Inmates reported having access to reading materials on a weekly basis.

DOC 350.35 Canteen. The jail shall have policies and procedures for the establishment and use of canteen, vending or other similar services for inmates.

DOC 350.35 (1) Canteen shall be made available to eligible inmates.

DOC 350.35 (2) Access to canteen may be restricted by the facility based upon inmate classification or status.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policy #704 addresses inmate commissary. Canteen is provided by Stellar Services and inmates are generally allowed to order once a week.

FOOD SERVICE

DOC 350.11 Food Service. The jail shall have policies and procedures relating to food service.

DOC 350.11 (1) The jail shall provide nutritious and quality food for all inmates.

DOC 350.11 (2) An annual menu review by a qualified nutritionist or dietician shall be completed and maintained in the facility files.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☒	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Policies #901 - #903 address food service. Food service is provided by CBM Managed Services. Meals are prepared onsite by CBM food service staff. I received a copy of the food service menu which is cycled through every three weeks. A letter from a Registered Dietician verified that food content and nutritional needs are appropriate. It was reported that the average daily caloric intake is between 2600 - 2800.

DOC 350.11 (3) An annual inspection of all full-production and service kitchens in a jail by a qualified, independent outside source documenting that the food service area meets health and safety codes.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: An inspection of the full-production kitchen was completed by the Grant County Health Department on 8/28/17.

DOC 350.11 (4) Internal monthly inspection of the food service area is completed and documented.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A spot check of records verified compliance.

DOC 350.11 (5) The kitchen area and all equipment are maintained in a sanitary condition. Routine inspections are completed and documented.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☒ Sample of facility records reviewed	☐ Other (specify):
☐ Non-compliant	☒ Sight confirmation by inspector	
☐ Not reviewed	☒ Verbal confirmation by facility staff	

Comments:

DOC 350.11 (6) Three nutritious meals are provided daily, two of which are hot. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☒ Sample of facility records reviewed	☐ Other (specify):
☐ Non-compliant	☐ Sight confirmation by inspector	
☐ Not reviewed	☒ Verbal confirmation by facility staff	

Comments:

DOC 350.11 (7) Food temperatures are properly maintained.

- Documentation of daily food preparation temperatures is maintained.
- Documentation of periodic serving temperature readings is maintained.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☒ Sample of facility records reviewed	☒ Other (specify):
☐ Non-compliant	☐ Sight confirmation by inspector	
☐ Not reviewed	☒ Verbal confirmation by facility staff	

Comments: Daily food temperature logs were observed.

DOC 350.11 (8) Food items are stored appropriately at least 6 inches off the floor. Opened food packages are stored in airtight containers that are labeled and dated. Food items are stored in appropriate locations and temperatures.

- Documentation of daily cooler and freezer temperatures is maintained.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☐ Sample of facility records reviewed	☐ Other (specify):
☐ Non-compliant	☒ Sight confirmation by inspector	
☐ Not reviewed	☒ Verbal confirmation by facility staff	

Comments:

DOC 350.11 (9) Special diets are provided as prescribed by a qualified health care professional.

- Documentation of special diet orders is maintained.

COMPLIANCE	VERIFICATION	
☒ Meets standard	☒ Policy and procedure manual review	☐ Previous compliance documented
☐ Needs improvement	☒ Sample of facility records reviewed	☐ Other (specify):
☐ Non-compliant	☐ Sight confirmation by inspector	
☐ Not reviewed	☒ Verbal confirmation by facility staff	

Comments: Special diet order forms were observed.

DOC 350.11 (10) An inmate may abstain from any foods that violate the inmate's religion. Consistent with available resources, the jail shall provide a substitute from other available foods from the menu served at the meal. The substitutions shall be consistent with sub. (1).

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments:

DOC 350.11 (11) Inmates assigned to the kitchen who prepare or serve food shall bathe or shower daily and be provided a clean uniform.

DOC 350.11 (12) No person who is known to be infected with any illnesses transmittable by food or utensils may be employed or work as a food handler in a facility.

DOC 350.11 (13) All persons who work in food service areas shall wear clean garments and clean caps or hairnets and shall keep their hands clean at all times when engaged in the handling of food, drink, utensils or equipment. Particular attention shall be given to the cleaning of the fingernails.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: Food service staff were observed wearing caps and gloves (inmates are not assigned to work in the kitchen).

DOC 350.11 (14) Inmate workers are provided orientation and training prior to assignment in the kitchen area.

- Documentation of orientation and training is maintained.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☐	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☒	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: N/A

DOC 350.11 (15) Inmate workers are supervised throughout all aspects of food preparation and service.

COMPLIANCE		VERIFICATION			
☐	Meets standard	☐	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☒	Not reviewed	☐	Verbal confirmation by facility staff		

Comments: N/A

DOC 350.11 (16) Food and drink shall be protected from contamination. Meals are covered during transit to and within the facility.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Covered food trays are utilized.

DOC 350.11 (17) Kitchen food storage and dishwashing equipment temperatures are routinely monitored and documented.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: Daily temperature logs were observed.

DOC 350.11 (18) Garbage containers are covered, emptied daily, and are kept clean.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.11 (19) Cleaning agents are stored separately from food service items.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☐	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☒	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments:

DOC 350.11 (20) A security procedure is in place to control and account for sharps, tools and utensils at all times.

- Documentation of daily control and inventory is maintained.

COMPLIANCE		VERIFICATION			
☒	Meets standard	☒	Policy and procedure manual review	☐	Previous compliance documented
☐	Needs improvement	☒	Sample of facility records reviewed	☐	Other (specify):
☐	Non-compliant	☐	Sight confirmation by inspector		
☐	Not reviewed	☒	Verbal confirmation by facility staff		

Comments: A daily control log was observed.