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

March 19, 2018

Sheriff Douglas Mrotek
Sawyer County Sheriff's Department
15880 Fifth Street, PO Box 567
Hayward, WI 54843-0567

**RE: 2017 Jail Inspection**

Dear Sheriff Mrotek:

Pursuant to Wisconsin Statute §301.37(3), an inspection of the Sawyer County Jail was conducted on December 18, 2017. The inspection compared the facility to the Department of Corrections Administrative Code Chapter DOC 350, applicable state statutes, and correctional best practices. The process included a review of records, dialogue with staff and inmates, and a walkthrough of the facility to assess the safety, sanitation, adequacy, and fitness of the facility. This correspondence will summarize the findings of the inspection.

## PHYSICAL ENVIRONMENT

The Sawyer County Jail consists of a podular design with a linear section attached. The facility has a maximum rated capacity of 104 adult inmates and this was verified on the date of the inspection. The total inmate population on the date of the inspection was 94; ten of those inmates were being housed at the Bayfield County Jail.

A Block (15 beds), B Block (7 beds), C Block (15 beds), D Block (8 beds), E Block (2 single cells), F Block (2 single cells), Dorm A (15 beds), Dorm B (4 beds), Dorm C (10 beds), Dorm D (11 beds), Dorm E (5 beds), Dorm F (10 beds)

**Total = 104 beds**

[redacted]

[redacted]

## INMATE RESOURCES

- **Support Groups** – AODA.
- **Religious Services –** Bible study.
- **Visitation** – Scheduled visiting is held Tuesday through Friday from 8:30 am to 11:30 am and 12:30 pm to 3:30 pm by appointment only. Video visitation is also provided.
- **Commissary** – Canteen can be ordered weekly by eligible inmates.
- **Recreation** – Recreation is limited to dayroom activities.
- **Reading Materials** – Inmates are afforded access to reading materials weekly.
- **Schooling** – GED classes are provided through Lac Courte Oreilles (LCO) Ojibwa Community College. Inmates may also take college courses upon approval at their own expense.

## INPROVEMENTS/CHANGES SINCE THE 2016 INSPECTION

- Added a Literacy Program; program aids GED and HSED students in areas such as reading comprehension, math skills, writing skills, etc.
- Added a re-entry program; this program was introduced by the North Lakes Clinic to provide services to assist inmates after release. Programs include, but are not limited to, mental health services and addiction counseling.

## CURRENT GOALS AND INITIATIVES

- Remodel holding cells 4 and 5 in the Huber dorm and turn it in to one single room to use for attorney visits, volunteer programs, etc.
- Currently working with the inmate phone service (Securus) in an effort to provide kiosks in all of the dorms/blocks in an effort to provide online video visitation and also provide access to items such as jail rules, inmate grievance requests, sick call requests and PREA information.
- [redacted]
- Working with Sawyer County to implement a Criminal Justice Coordinating Committee (CJCC) in an effort to provide alternatives to incarceration.
- Currently in the process to find a new provider for a Records Management System for the Sheriff's Department to include JMS, CAD, MOBILE and RMS.
- Update the Sawyer County Jail law library. Purchased a new computer and are currently negotiating a contract with Fast Case to provide software for the program.
- Addition of Sergeant positions to provide line supervision.
- Filling two full-time jailer positions.
- Maintain at least four part-time jail staff.

## SUMMARY OF FACILITY OPERATIONS

The annual jail inspection consisted of meeting with Sawyer County administrative staff, security staff and healthcare personnel. The site visit included a review of records, dialogue with staff and inmates and a walkthrough of the jail to assess the safety, sanitation, adequacy and fitness of the facility.

Safety inspections and procedures continue to be completed as required: daily, weekly, monthly and annually. [redacted] cell searches are completed by jail staff, and all searches are logged and kept in a binder. Correctional Officer Prince demonstrated proficiency when applying a SCBA unit.

## INSPECTION SUMMARY

The following items are in need of attention to ensure the facility is clean and in a healthful condition as outlined in Wisconsin Statute §302.37: *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 shower floor in booking needs a thorough cleaning as it was in an unsanitary condition, specifically under the shower mat, on the day of the inspection.
- The caulking around the shower floor in F1 needs to be reapplied as it is peeling up and missing in areas.
- The caulking around the shower floor in E2 needs to be reapplied as it is peeling up and missing in areas.
- The caulking around the shower floor in D block needs to be reapplied as it is peeling up and missing in areas.
- The water damaged ceiling tiles in D block need to be replaced.
- The lower shower bar in C block needs attention as it appeared to be covered in mold/mildew/soap scum on the day of the inspection.
- Remove graffiti from wall in C7.
- C8 has a mattress that is torn; replace with new mattress.
- B7 remove paper from light.
- B6 remove paper on vent.
- A2 sink was dripping on the day of the inspection. Check to see if this is still an issue and fix if it is.
- A1 hot water was not working; this needs to be fixed.
- The caulking around the shower floor in A block needs to be reapplied as it is peeling up and missing in areas. Address peeling paint in shower as well.
- Remove graffiti from wall in A5.
- Replace shower curtain in Dorm A as it was in an unsanitary condition on the day of the inspection.
- Address graffiti on the walls in Dorm A.
- Replace phone cord in Dorm A; current cord is frayed.

- Water does not work on sink in holding cell 4; this needs to be fixed. Remove paper from vent.
- The water on the sink in holding cell 5 does not work; this needs to be fixed prior to utilizing this cell.
- Remove drawing on the wall in the shower of Dorm D.

Overall, the physical condition of the facility is well maintained and kept in sanitary condition.

## VIOLATIONS OF ADMINISTRATIVE RULE

No violations were found on the day of the inspection.

## RECOMMENDATIONS

- Update required policies prior to 2018 inspection.
- Set up a routine cleaning schedule for all showers.
- As part of your sanitation inspections address items covering vents/lights and graffiti on walls. Hold inmates accountable for damages caused by them.
- As part of your sanitation inspections ensure all water in each cell/shower/bathroom is working properly. If not, make sure maintenance addresses the issue right away.

## STATEMENT OF APPROVAL

The Sawyer County Jail is approved by the Department of Corrections for the secure detention of adult offenders with the maximum capacity of 104. This approval is contingent on the continued compliance with all applicable state statutes and administrative codes.

If you have any questions regarding the inspection results summarized in this letter and found in the inspection worksheet attached or if I may be of any assistance regarding correctional matters, please contact me.

I wish to thank you, Sheriff Mrotek, Jail Administrator Sajdera, Correctional Officer Woller and all jail staff on duty on the day of the inspection for the assistance provided during the inspection. I appreciate all of your efforts preparing for the inspection. Jail Administrator Sajdera is recognized for the detailed assembly of documents requested prior to my arrival. Thank you.

Sincerely,

Heidi Mellenberger

Heidi Mellenberger
Detention Facilities Specialist

cc: Joseph Sajdera, Jail Administrator
Kristi Dietz, Director of ODF
File

Enclosure-Inspection Worksheet

# CHAPTER DOC 350 INSPECTION DOCUMENT

**COUNTY:** Sawyer **DATE:** 12/18/2017

## 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: N/A

**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:

**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 |
| ☐ | Needs improvement | ☒ | Sample of facility records reviewed | ☐ | Other (specify): |
| ☐ | Non-compliant | ☐ | Sight confirmation by inspector | | |
| ☐ | Not reviewed | ☒ | Verbal confirmation by facility staff | | |

Comments: A double bunking staffing agreement is on file dated August 12, 2014.

**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: Policy J-23. Classification is completed as required and inmates are properly segregarted.

**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: Receiving cells are used as single occupancy only.

**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): |
| ☐ | Non-compliant | ☐ | Sight confirmation by inspector | | |
| ☐ | Not reviewed | ☐ | Verbal confirmation by facility staff | | |

Comments: Policy J-23. Northpointe decision tree is utilized for inmate classification. Inmates are classified as required.

## 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 J-8 and J-10B. Well being checks of inmates are being conducted as required per code. Each observation is documented as required. Inmates on suicide watch are being observed every 15 minutes and those observations are properly documented.

**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 J-08. Inmate counts are conducted at each shift change by the outgoing jailer and properly documented.

**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 J-31. Facility and area searches are completed an documented as required.

**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: Policy J-29.

**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 J-31. Door and lock inspections are completed as required and documented on a comprehensive form.

**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 J-31.

**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 development required (brought forward from 2016 inspection). Weapons signage is posted at the entrances into the facility and secure lockers are available.

**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 development required (brought forward from 2016 inspection); this is in reference to maintenance tools. Kitchen sharps are inventoried/stored as required.

**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: Policy J-19. A fire inspection was completed on November 7, 2017 and one violation was noted, "Ensure that the means of egress illumination is equipped with an emergency power system capable of providing 30 minutes of illumination in the event of primary power loss". The jail was given 60 days to correct this violation. Fire extinguishers were inspected in November 2017. A written evacuation plan is in place and jail staff were able to articulate evacuation routes and policies of the jail on the day of the inspection. Staff were trained in fire safety in April 2017.

**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: Policy J-19. Evacuation routes are posted throughout the facility as required.

**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: Policy update required (brought forward from 2016 inspection). Current policy does not include 350.19(4). Training was provided on April 2017. This training was documented as required.

**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: Policy update required; current policy states two fire inspections completed annually; revise policy if this is not your current practice (brought forward from 2016 inspection). A fire inspection was completed on November 7,

2017.

**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: Policy J-19. Monthly fire and safety inspections are completed and documented as required. Inspections include the SCBA, hose cabinets, fire exits and fire extinguishers. Fire extinguishers were date stamped November 2017.

**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 J-03.

**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: Policy J-03. Reports reviewed contained all required/relevant information.

**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 J-03. Policy update required to include (1) in policy (brought forward from 2016 inspection document).

**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**.

(a) 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 J-30. Policy update required (brought forward from 2016 inspection document). Minor and major violation reports were reviewed. All disciplinary records reviewed found procedure completed meets requirement.

## 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: Policy J-10. Inmate health screening forms are completed by the booking officer and placed in the active medical box in the Nurse's office. Health screening forms reviewed included review documentation.

**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: Policy J-10. A review of health appraisals during the course of the inspection found that a majority were completed within the required time frame.

**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: A medical office provides needed space to complete health care services in a confidential manner.

**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: The jail nurse is on-site 16 hours per week (M, Tu, Th, F 4 hours each day). A nurse practitioner is on site 1 time every other week. Mental health services is provided 4 hours per week. Medical staff is available 24/7 via telephone. Inmates fill out a sick call form to request a medical assessment or treatment. Sick call forms are collected by the jailer and filed in the nurse's box. In the case of an emergency, medical staff are notified right away.

**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: All medical staff licensing is current.

**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: Medical records are secured in the locked medical office.

**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: Staff received required training in May 2017.

**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: Policy J-10. Medical documents are maintained in the inmate's confidential medical file.

**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: Current listings are located in the medical office, jail booking area and the jail control pod.

**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: Policy J-10.

**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: Policy J-10. Policy update required to include (6). This is being brought forward from the 2016 inspection document.

**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: Routine medical care is available 4 times per week when the nurse is on-site.

**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: Policy J-10. Policy revision required. Current policy does not address a provision for inmates with chronic medical conditions.

**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: Policy J-10.

**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: The jail nurse maintains the inmate medical file; health records are maintained in a confidential manner.

**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 J-10. Special diets are reviewed by the jail health care staff; a dietary form is completed and forwarded to the kitchen for all ordered special diet needs.

**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: Policy update required; current policy does not address pregnancy management. Medical staff follow Advanced Correctional healthcare policy and protocols and typically utilize the inmate's personal physician to provide medical service.

**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: Advanced Correctional Healthcare provides inmate medical services.

**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 J-06A. Health summary forms are completed as required.

**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 J-10D.

**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: Policy J-10.

**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: Policy J-10C. Properly trained staff deliver medications when the jail nurse is not on site. Medication control and administration training was provided in May 2017. Medical records reviewed during this inspection showed that a qualified health care professional prescribed medications and ordered treatments.

**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: Policy J-10C. Staff received required training in May 2017.

**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: A medication verification form is completed by security staff upon receiving approval by the on-call medical staff.

**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: Policy J-10C.

**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: Security staff receive training prior to delivering medications. Medications are delivered twice daily. Jail staff received required training in May 2017.

**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: Policy J-10C. Medication Administration Records (MARs) were reviewed during the course of the inspection and all found to be properly completed.

**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: Policy J-10K.

## 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: Policy J-10B.

**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: Policy J-10B. Document is completed by the arresting/transporting officer regarding the inmate's known medical and mental health.

**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: Policy J-10B. A health screening is completed on all bookings and forwarded to the jail nurse for review.

**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: Policy J-10B.

**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: Policy J-10B.

**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: Policy J-10B requires update to include the 12 hour contact component. (Brought forward from the 2016 inspection document).

**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: Policy J-10B.

**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: Communication is completed via an informational pass-on log.

**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: Policy J-10B.

**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: Policy J-10B.

**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: Policy J-10B.

**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: Policy J-10 and Policy J-10B. Staff training is provided annually as required. Training was provided in May 2017.

**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: Policy J-10B.

**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: Policy J-10B.

**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 process.**

**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 J-27.

**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: Policy J-27.

**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: Policy J-27. Policy update required; brought forward from the 2016 inspection worksheet. A supervisory review is required every seven days and needs to be documented.

**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: Policy J-27. Policy update required; current policy does not address 350.25(4). This is brought forward from the 2016 inspection worksheet.

## 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: Policy J-24. Records are maintained in the jail management system.

**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: Policy J-24. Records are stored in the control pod, the jail management system, the court officer's office, the medical office and a secure storage area.

# 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: Policy J-09. Daily inspections are completed and logged as required.

**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 J-09. The facility is well maintained and remains in good condition.

**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: Policy J-09. Laundry is completed per code requirements.

**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: Mattresses viewed were in proper condition.

**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: Policy J-09.

**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: Policy J-09.

**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: Policy J-14. Monthly service is provided by Guardian Pest Control.

**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: Policy J-09H. The initial issue of items is verified by the inmates's signature at booking.

**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: Policy J-09G. Cleaning supplies are provided to inmates 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: Policy J-31. Safety and sanitation inspections of the jail are completed on a montly basis and documented on a comprehensive form.

**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: Policy J-09. Fingernail clippers are disinfected after each use.

**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: Policy J-31. Property storage containers are properly sanitized as required per code.

**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: Policy J-09G. Trash is removed daily as required per code.

**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: Policy J-09G.

## 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 J-20.

**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: Policy J-09B.

**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: Policy development required. One definition of an indigent inmate is found in Policy J-09 in reference to canteen and mail.

**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 J-09A.

**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: Mail is delivered daily by jail staff.

**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: Policy J-09A.

**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: Policy J-09A.

**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: Policy J-09A. A form is utilized to notify inmates of undelivered mail.

**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 J-09F.

**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: Policy J-09F. Inmate visits are properly documented.

**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: Policy update required to include 350.30(4).

**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: Policy revision required to include 350.30(5). Visitation schedule is posted and readily accessible to visitors and inmates.

**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: Policy revision required to include 350.30(6).

**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 J-21E (1), (3), (4) require update regarding volunteer orientation. Unable to locate (2) in policy.

**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: Policy J-21A.

**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: Policy J-21A.

**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: Policy J-21A.

**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: Policy revision required to inlcude 350.32(5).

**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 J-21B.

**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: Recreation is limited to dayroom activities.

**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: Policy J-09B.

**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 J-09D. Update required to include 350.35(2).

## 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: Policy J-09E. A menu review was completed by Mary Williams, RDN, CD on December 15, 2017.

**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 annual inspection was completed on October 21, 2017 by the Barron County Health and Human Services Department. Two violations were noted and have since been corrected.

**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: Detailed monthly inspections are completed and documented.

**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: The kitchen area and all equipment are maintained in clean and sanitary conditions. Routine inspections are completed and properly documented.

**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: Policy J-09E.

**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: Policy J-09E. Temperatures are recorded on the production logs.

**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: Policy J-09E. Food items are properly stored; opened food packages are stored in airtight containers and are properly labeled.

**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: Policy J-09E. Special diets are approved by jail medical staff.

**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: Policy J-09E.

**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: N/A

**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: Policy J-09E. Meals are covered during delivery.

**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: Policy J-09E.

**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: Policy J-09E.

**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: Policy J-09E. Cleaning agents are stored separately from food service items.

**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: Policy revision required to include 350.11(20). Sharps are secured [redacted] and inventoried daily and properly documented.