



**PUBLIC SAFETY & JUSTICE COMMITTEE  
MONDAY – NOVEMBER 1, 2010 - 4:00 P.M.  
CONFERENCE ROOM N-1 - FIFTH FLOOR  
ROCK COUNTY COURTHOUSE-EAST**

**Agenda**

1. Call to Order
2. Adoption of Agenda
3. Adoption of Minutes – October 18, 2010
4. Citizen Participation, Communications, Announcements, Information
5. Consent Calendar
  - A. Transfers and Appropriations
    1. Communications Center (2)
  - B. Bills
  - C. Encumbrances
  - D. Pre-Approved Encumbrance Amendment
6. Committee Approval
7. Countywide Communications Upgrade - Update
8. 2010 Rock County Jail Inspection Report
9. Committee Requests and Motions
10. Adjournment

ROCK COUNTY

SUPPLEMENTAL APPROPRIATIONS - TRANSFERS

10-49  
Transfer No.

Requested by Communications Center

David Sleeter

Department

Department Head

Date 10/25/10

FROM

TO

ACCOUNT #	DESCRIPTION	AMOUNT
23-2400-0000	62400 R&M Services	1,000

ACCOUNT #	DESCRIPTION	AMOUNT
23-2400-0000	62420 R&M Machinery/Equip	1,000

FISCAL NOTE:

Sufficient funds are available in the above object code for the requested transfer.

ADMINISTRATIVE NOTE:

Recommended.



REQUIRED APPROVAL:

- Governing Committee
- Finance Committee

DATE

COMMITTEE CHAIR

\_\_\_\_\_  
File \_\_\_\_\_

# ROCK COUNTY TRANSFER REQUESTS

TO: FINANCE DIRECTOR

FINANCE DIRECTOR  
RECEIVED  
#10-49  
OCT 25 2010

REQUESTED BY: ROCK COUNTY COMMUNICATIONS CENTER  
 Department David Stoltz  
 Department Head Signature

DATE: OCTOBER 25, 2010

FROM:	AMOUNT	TO:	AMOUNT
1) ACCOUNT #: 23-2400-0000-62400 DESCRIPTION: REPAIR & MAINTENANCE SERVICES CURRENT BALANCE: \$ 13,671.92 @ 9/20/10 Paid PROVIDED BY THE FINANCE DIRECTOR 10/25/10	\$1,000.00	ACCOUNT #: 23-2400-0000-62420 DESCRIPTION: MACHINERY/EQUIPMENT R&M	\$1,000.00
2) ACCOUNT #: DESCRIPTION: CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR		ACCOUNT #: DESCRIPTION:	
3) ACCOUNT #: DESCRIPTION: CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR		ACCOUNT #: DESCRIPTION:	
4) ACCOUNT #: DESCRIPTION: CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR		ACCOUNT #: DESCRIPTION:	

REASON FOR TRANSFER - BE SPECIFIC:

Transfer of funds out of account #23-2400-0000-62400 is required to pay for communications infrastructure repairs not covered by contract, which have exceeded the budgeted amount due to the unpredictable nature of these repairs. The funds are available for transfer because the wireless network maintenance charges have been less than anticipated.

ROCK COUNTY

SUPPLEMENTAL APPROPRIATIONS - TRANSFERS

10-65  
Transfer No.

Requested by Communications Center Department David Sleeter  
Department Head

Date 10/27/10

FROM

ACCOUNT #	DESCRIPTION	AMOUNT
23-2400-0000	64200 Training Exp.	1,575

TO

ACCOUNT #	DESCRIPTION	AMOUNT
23-2400-0000	62119 Other Contracted Services	1,500
23-2400-0000	63406 Clothing/Uniforms	75

FISCAL NOTE:

Sufficient funds are available in the above object code for the requested transfer.

ADMINISTRATIVE NOTE:

Recommended

REQUIRED APPROVAL:

- Governing Committee
- Finance Committee

DATE

COMMITTEE CHAIR

\_\_\_\_\_

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\_\_\_\_\_ File

# ROCK COUNTY TRANSFER REQUESTS


FINANCE DIRECTOR  
RECEIVED

# 10-63  
OCT 27 2010

TO: FINANCE DIRECTOR

REQUESTED BY: ROCK COUNTY COMMUNICATIONS CENTER Department  Department Head Signature

DATE: OCTOBER 27, 2010

FROM:	AMOUNT	TO:	AMOUNT
1) ACCOUNT #: 23-2400-0000-64200 DESCRIPTION: TRAINING EXPENSE CURRENT BALANCE: \$9350 <sup>1209/30/10</sup>  PROVIDED BY THE FINANCE DIRECTOR	\$1,575.00	ACCOUNT #: 23-2400-0000-62119 DESCRIPTION: OTHER CONTRACTED SERVICES	\$1,500.00
2) ACCOUNT #: DESCRIPTION: CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR		ACCOUNT #: 23-2400-0000-63406 DESCRIPTION: CLOTHING & UNIFORMS	\$75.00
3) ACCOUNT #: DESCRIPTION: CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR		ACCOUNT #: DESCRIPTION:	
4) ACCOUNT #: DESCRIPTION: CURRENT BALANCE: \$ PROVIDED BY THE FINANCE DIRECTOR		ACCOUNT #: DESCRIPTION:	

REASON FOR TRANSFER - BE SPECIFIC: Transfer is needed to pay for psychological exams of three new hires and uniform order of one new supervisor position. The funds are available due to the Motorola Conference being covered in full for the communications center this year.

Account Number	Name	Yearly Prct Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2121000000-62132	CR/DR CARDS FEES	1,000.00 64.2%	642.43	0.00	357.57		
	P1000561-PO# 11/01/10 -VN#048147					21.16	
							21.16
					336.41		
							21.16
2121000000-62400	R & M SERV	42,981.00 75.0%	28,003.19	4,265.65	10,712.16		
	P1000568-PO# 11/01/10 -VN#038471					82.65	
							82.65
					10,629.51		
							82.65
2121000000-62410	R & M-VEHICLES	134,886.00 74.1%	99,137.98	904.40	34,843.62		
	P1000548-PO# 11/01/10 -VN#018372					126.68	
	P1000549-PO# 11/01/10 -VN#011156					41.50	
	P1000555-PO# 11/01/10 -VN#012185					162.50	
	P1000557-PO# 11/01/10 -VN#012562					87.00	
	P1000562-PO# 11/01/10 -VN#044334					160.11	
	P1000566-PO# 11/01/10 -VN#010231					2,075.92	
	P1000579-PO# 11/01/10 -VN#014534					37.01	
	P1000583-PO# 11/01/10 -VN#030347					13.54	
	P1000584-PO# 11/01/10 -VN#035501					171.74	
	P1000585-PO# 11/01/10 -VN#029613					67.58	
	P1000587-PO# 11/01/10 -VN#015284					2,214.90	
	P1003376-PO# 11/01/10 -VN#036896					175.00	
							5,333.48
					29,510.14		
							5,333.48
2121000000-63101	POSTAGE	12,600.00 82.4%	10,391.24	0.00	2,208.76		
	P1000590-PO# 11/01/10 -VN#015775					75.64	
	P1000601-PO# 11/01/10 -VN#039501					31.23	
							106.87
					2,101.89		
							106.87
2121000000-63406	CLOTHING/UNIFORM	50,050.00 71.5%	35,811.44	0.07	14,238.49		
	11/01/10 -VN#012045					81.56	
	11/01/10 -VN#015492					107.56	
	11/01/10 -VN#032640					31.62	
	P1000563-PO# 11/01/10 -VN#012827					-62.99	
	P1000571-PO# 11/01/10 -VN#013661					399.60	
	P1000576-PO# 11/01/10 -VN#037985					304.20	
							861.55
					13,376.94		
							861.55
2121000000-63900	AMMO/RANGE SUPPL	21,500.00 78.4%	14,222.64	2,648.96	4,628.40		
	P1000577-PO# 11/01/10 -VN#037671					1,271.80	
	P1001010-PO# 11/01/10 -VN#016481					1,300.00	
	P1003375-PO# 11/01/10 -VN#012928					247.00	
							2,818.80
					1,809.60		
							2,818.80
2121000000-63902	CRIME PREVENTION	4,250.00 86.3%	3,670.55	0.01	579.44		
	P1003429-PO# 11/01/10 -VN#012147					150.00	

Account Number	Name	Yearly Prct Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
					CLOSING BALANCE	429.44	150.00
2121000000-63904	POLICING/1ST AID	17,165.00 58.2%	9,408.07	586.90	7,170.03		
	P1000590-PO# 11/01/10 -VN#015775			ROCK COUNTY SHERIFFS PETTY CAS		51.37	
	P1003426-PO# 11/01/10 -VN#035345			QUARTERMASTER		104.85	
					CLOSING BALANCE	7,013.81	156.22
2121000000-64200	TRAINING EXP	21,000.00 56.7%	8,476.57	3,435.68	9,087.75		
	P1000551-PO# 11/01/10 -VN#011318			BLACKHAWK TECHNICAL COLLEGE		150.00	
	P1003373-PO# 11/01/10 -VN#013624			JANESVILLE POLICE DEPARTMENT		150.00	
	P1003378-PO# 11/01/10 -VN#050212			DAO LIMESTONE		416.00	
	P1003428-PO# 11/01/10 -VN#044542			FBI MILWAUKEE		50.00	
	P1003431-PO# 11/01/10 -VN#013624			JANESVILLE POLICE DEPARTMENT		100.00	
					CLOSING BALANCE	8,221.75	866.00
2121000000-64904	SUNDRY EXPENSE	14,500.00 44.6%	6,478.32	0.02	8,021.66		
	P1003434-PO# 11/01/10 -VN#048903			LYNN CARD COMPANY		182.95	
					CLOSING BALANCE	7,838.71	182.95
2121000000-67171	C.A. -\$1000/MORE	56,338.00 61.7%	34,797.50	0.00	21,540.50		
	P1003427-PO# 11/01/10 -VN#050189			VIKING COMMUNICATIONS		313.00	
					CLOSING BALANCE	21,227.50	313.00
2121000000-67172	C.A. \$500-\$999	9,471.00 77.6%	7,355.31	0.00	2,115.69		
	P1003217-PO# 11/01/10 -VN#039632			OFFICE PRO		815.81	
					CLOSING BALANCE	1,299.88	815.81
	SHERIFF		PROG-TOTAL-PO			11,708.49	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$11,708.49 INCURRED BY SHERIFF. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

**NOV 01 2010**

DATE \_\_\_\_\_ CHAIR

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2121670000-62119	OTHER SERVICES	247,402.00	53.9%	133,440.36	0.00	113,961.64	
	P1000551-PO# 11/01/10 -VN#011318			BLACKHAWK TECHNICAL COLLEGE		17,153.44	
	P1000553-PO# 11/01/10 -VN#011725			CESA 2		18,314.92	
				CLOSING BALANCE		78,493.28	35,468.36
	RECAP OPERATIONS		PROG-TOTAL-PO				35,468.36

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$35,468.36 INCURRED BY RECAP OPERATIONS. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

NOV 01 2010 DATE \_\_\_\_\_ CHAIR



Account Number	Name	Yearly Prct Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2122000000-62163	LAUNDRY	95,696.00 98.8%	85,385.77	9,212.23	1,098.00		
	P1000603-PO# 11/01/10 -VN#044403		VOGUE CLEANERS			105.00	
			CLOSING BALANCE		993.00		105.00
2122000000-62170	PHYSICIAN/OTHER	722,842.00 99.1%	664,519.32	52,460.68	5,862.00		
	P1000553-PO# 11/01/10 -VN#011725		CESA 2			2,200.00	
	P1003423-PO# 11/01/10 -VN#034606		MERCY HEALTH SYSTEM PHYSICIAN			86.84	
			CLOSING BALANCE		3,575.16		2,286.84
2122000000-63200	PUBL/SUBCR/DUES	600.00 46.1%	277.00	0.00	323.00		
	P1003433-PO# 11/01/10 -VN#046399		CRS INC			140.00	
			CLOSING BALANCE		183.00		140.00
2122000000-63406	CLOTHING/UNIFORM	45,770.00 66.8%	30,593.41	0.06	15,176.53		
	11/01/10 -VN#024953		GERBER, JACKIE			73.83	
	11/01/10 -VN#032756		JOHNS, MARK			189.89	
	11/01/10 -VN#046393		SAXE, CHRIS			179.50	
	11/01/10 -VN#047718		SHERLEY, MICHAEL			22.16	
	11/01/10 -VN#050258		SCHUMACHER, JENNIFER			94.92	
	P1000563-PO# 11/01/10 -VN#012827		GALLS INC			207.23	
	P1000571-PO# 11/01/10 -VN#013661		JEFFERSON FIRE AND SAFETY INC			399.60	
	P1000576-PO# 11/01/10 -VN#037985		LARK UNIFORMS			457.19	
	P1000577-PO# 11/01/10 -VN#037671		LOADMASTER TACTICAL			90.62	
	P1000595-PO# 11/01/10 -VN#022965		SHOE BOX LTD, THE			113.40	
			CLOSING BALANCE		13,348.19		1,828.34
2122000000-64200	TRAINING EXP	16,750.00 19.6%	-382.63	3,674.52	13,458.11		
	P1003430-PO# 11/01/10 -VN#023676		WISCONSIN DEPARTMENT OF JUSTIC			75.00	
	P1003431-PO# 11/01/10 -VN#013624		JANESVILLE POLICE DEPARTMENT			50.00	
			CLOSING BALANCE		13,333.11		125.00
2122000000-64904	SUNDRY EXPENSE	135,000.00 63.8%	61,458.02	24,720.75	48,821.23		
	P1000551-PO# 11/01/10 -VN#011318		BLACKHAWK TECHNICAL COLLEGE			520.00	
	P1000570-PO# 11/01/10 -VN#010291		JAYS BIG ROLLS INC			450.00	
	P1000579-PO# 11/01/10 -VN#014534		MENARDS			83.32	
	P1000597-PO# 11/01/10 -VN#048467		STAPLES ADVANTAGE			538.95	
	P1000602-PO# 11/01/10 -VN#029334		UNISOURCE WORLDWIDE INC			381.92	
	P1003425-PO# 11/01/10 -VN#048607		MOORE MEDICAL LLC			269.26	
			CLOSING BALANCE		46,577.78		2,243.45

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
		CORR.FACILITY	PROG-TOTAL-PO			6.728 63	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$6,728.63  
 INCURRED BY CORRECTIONAL FACILITY. CLAIMS COVERING THE ITEMS ARE PROPER  
 AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

**NOV 01 2010**

DATE \_\_\_\_\_ CHAIR

Account Number	Name	Yearly Prct Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2212000000-63200	PUBL/SUBCR/DUES	7,455.00 95.1%	7,095.27	0.00	359.73		
	P1003464-PO# 11/01/10 -VN#033730		STATE BAR OF WISCONSIN			61.15	
			CLOSING BALANCE		298.58		61.15
2212000000-63202	LAW BOOKS	25,000.00 70.9%	17,733.48	0.00	7,266.52		
	P1000286-PO# 11/01/10 -VN#038607		THOMSON WEST			2,140.48	
			CLOSING BALANCE		5,126.04		2,140.48
2212000000-67171	C.A. - \$1000/MORE	2,200.00 0.0%	0.00	0.00	2,200.00		
	P1003194-PO# 11/01/10 -VN#028264		HENRICKSEN			1,885.46	
			CLOSING BALANCE		314.54		1,885.46
	CIRCUIT COURTS		PROG-TOTAL-PO			4,087.09	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$4,087.09 INCURRED BY CIRCUIT COURTS. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

**NOV 01 2010**

DATE \_\_\_\_\_ CHAIR

Account Number	Name	Yearly Prct Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2324000000-62119	OTHER SERVICES	9,500.00 81.3%	7,731.77	0.01	1,768.22		
	P1000737-PO# 11/01/10 -VN#014976					167.20	
	P1000738-PO# 11/01/10 -VN#038471					15.34	
	P1003214-PO# 11/01/10 -VN#012873					400.00	
	CLOSING BALANCE				1,185.68		582.54
2324000000-62217	TELETYPE SERV	28,270.00 98.7%	26,725.50	1,188.50	356.00		
	P1003530-PO# 11/01/10 -VN#017445					100.00	
	CLOSING BALANCE				256.00		100.00
2324000000-62420	MACH & EQUIP RM	14,120.00 104.8%	11,727.90	3,077.21	-685.11		
	P1001851-PO# 11/01/10 -VN#018472					690.00	
	*** OVERDRAFT *** <b>TRANSFER PENDING</b>						
	CLOSING BALANCE				-1,375.11		690.00
2324000000-63100	OFC SUPP & EXP	9,000.00 50.2%	4,523.86	0.00	4,476.14		
	11/01/10 -VN#024911					14.20	
	P1003399-PO# 11/01/10 -VN#044640					51.00	
	P1003453-PO# 11/01/10 -VN#015731					149.00	
	P1003455-PO# 11/01/10 -VN#020599					15.96	
	CLOSING BALANCE				4,245.98		230.16
2324000000-63406	CLOTHING/UNIFORM	6,825.00 97.7%	6,467.80	204.25	152.95		
	11/01/10 -VN#039525					40.08	
	CLOSING BALANCE				112.87		40.08
2324000000-64200	TRAINING EXP	27,227.00 55.0%	13,796.20	1,179.91	12,250.89		
	P1000733-PO# 11/01/10 -VN#010928					634.51	
	P1001336-PO# 11/01/10 -VN#038753					120.00	
	P1002643-PO# 11/01/10 -VN#049803					259.00	
	P1003499-PO# 11/01/10 -VN#050235					10.00	
	P1003500-PO# 11/01/10 -VN#034933					1,795.00	
	P1003503-PO# 11/01/10 -VN#047481					100.00	
	CLOSING BALANCE				9,332.38		2,918.51
	911 PROJ.OPER.		PROG-TOTAL-PO			4,561.29	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$4,561.29 INCURRED BY 911 PROJECT OPERATION. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

**NOV 01 2010**

DATE \_\_\_\_\_ CHAIR

Account Number	Name	Yearly Prct Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2416100000-62126	OFFICER FEES	9,000.00 62.0%	5,530.05	55.01	3,414.94		
	P1000945-PO# 11/01/10 -VN#042313			BAT ENTERPRISES LLC		272.50	
				CLOSING BALANCE	3,142.44		272.50
2416100000-62501	REPORTER FEES	8,000.00 62.3%	4,986.50	0.03	3,013.47		
	P1000950-PO# 11/01/10 -VN#032120			HANSON, CARLA		24.00	
	P1000954-PO# 11/01/10 -VN#035145			BOUZIANE, VICKI N		111.00	
	P1000960-PO# 11/01/10 -VN#047918			BARKLEY, MICAL		9.50	
	P1000961-PO# 11/01/10 -VN#021394			MUELLER CPR-CM, TAMMIE D		21.50	
	P1000990-PO# 11/01/10 -VN#048922			WOOLSTON, STEVI R		40.50	
				CLOSING BALANCE	2,806.97		206.50
2416100000-63202	LAW BOOKS	2,000.00 56.7%	1,135.37	0.00	864.63		
	P1000962-PO# 11/01/10 -VN#017221			WEST GROUP		251.50	
	P1000963-PO# 11/01/10 -VN#033730			STATE BAR OF WISCONSIN		238.22	
				CLOSING BALANCE	374.91		489.72
2416100000-63300	TRAVEL	7,800.00 57.5%	4,486.91	0.00	3,313.09		
	P1002333-PO# 11/01/10 -VN#020670			PAPER VALLEY HOTEL CORP		140.00	
				CLOSING BALANCE	3,173.09		140.00
				DIST. ATTORNEY			
				PROG-TOTAL-PO		1,108.72	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$1,108.72 INCURRED BY DISTRICT ATTORNEY. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

NOV 01 2010 DATE \_\_\_\_\_ CHAIR

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2416110000-64200	TRAINING EXP	900.00 25.5%	230.00	0.00	670.00		
		11/01/10 -VN#022629	STAVN,CLIFF			295.00	
			CLOSING BALANCE		375.00		295.00
		DPP/DV	PROG-TOTAL-PO			295.00	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$295.00 INCURRED BY DEFER. PROSECUTION/DOM.VIOLENCE. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

**NOV 01 2010**

DATE \_\_\_\_\_ CHAIR

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2826000000-61300	PER DIEMS	9,580.00 62.8%	6,025.34	0.00	3,554.66		
	P1000369-PO# 11/01/10 -VN#047964		LIPPINCOTT,CHRISTAL			165.00	
			CLOSING BALANCE		3,389.66		165.00
2826000000-62170	PHYSICIAN/OTHER	137,225.00 69.2%	95,032.22	0.02	42,192.76		
	P1000366-PO# 11/01/10 -VN#041483		AIT LABORATORIES			900.00	
	P1000368-PO# 11/01/10 -VN#029222		MIDWEST MICROTECH INC			456.50	
	P1000370-PO# 11/01/10 -VN#048415		BP POLO			4,863.50	
	P1000613-PO# 11/01/10 -VN#023413		DANE COUNTY CORONERS OFFICE			4,000.00	
	P1000614-PO# 11/01/10 -VN#046739		PUBLIC SAFETY CENTER INC			30.50	
	P1001895-PO# 11/01/10 -VN#049256		HUNTINGTON MD,ROBERT			1,050.00	
	P1002899-PO# 11/01/10 -VN#040341		HAAS DO,THOMAS S			3,000.00	
	P1003475-PO# 11/01/10 -VN#014550		MERCY HEALTH SYSTEM			340.25	
			CLOSING BALANCE		27,552.01		14,640.75
2826000000-63200	PUBL/SUBCR/DUES	500.00 56.3%	281.95	0.00	218.05		
	P1003544-PO# 11/01/10 -VN#050246		NATIONAL ASSOCIATION OF MEDICA			350.00	
*** OVERDRAFT ***	<b>TRANSFER REQUIRED</b>						
			CLOSING BALANCE		-131.95		350.00
	CORONER		PROG-TOTAL-PO			15,155.75	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$15,155.75 INCURRED BY CORONER. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

NOV 01 2010 DATE \_\_\_\_\_ CHAIR

Account Number	Name	Yearly Prct Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
3438500000-62126	OFFICER FEES	23,600.00	68.8%	16,049.53	196.40	7,354.07	
	P1000352-PO# 11/01/10 -VN#036652			BADGER PROCESS SERVICE INC		58.00	
	P1000355-PO# 11/01/10 -VN#043961			MARKLEY INVESTIGATIONS INC		548.00	
	P1003445-PO# 11/01/10 -VN#032264			WINNEBAGO COUNTY TREASURER		114.00	
	P1003447-PO# 11/01/10 -VN#050204			COURT PROCESS SERVER LLC		65.00	
	P1003457-PO# 11/01/10 -VN#032264			WINNEBAGO COUNTY TREASURER		102.00	
	P1003462-PO# 11/01/10 -VN#032386			TULSA COUNTY SHERIFF'S DEPARTM		50.00	
				CLOSING BALANCE		6,417.07	937.00
3438500000-62210	TELEPHONE	11,000.00	69.4%	7,640.14	0.00	3,359.86	
	P1000357-PO# 11/01/10 -VN#046222			CERTIFIED LANGUAGES INTL		170.40	
				CLOSING BALANCE		3,189.46	170.40
3438500000-62503	INTERPRETER FEES	3,400.00	42.7%	1,455.00	0.00	1,945.00	
	P1000359-PO# 11/01/10 -VN#040908			MENDEZ,SEBASTIAN		30.00	
				CLOSING BALANCE		1,915.00	30.00
3438500000-63100	OFC SUPP & EXP	22,200.00	68.3%	15,165.05	0.00	7,034.95	
	P1000353-PO# 11/01/10 -VN#016026			SECRETARY OF STATE		20.00	
				CLOSING BALANCE		7,014.95	20.00
3438500000-63202	LAW BOOKS	1,900.00	92.1%	1,750.34	0.00	149.66	
	P1003456-PO# 11/01/10 -VN#033730			STATE BAR OF WISCONSIN		57.96	
				CLOSING BALANCE		91.70	57.96
	CHILD SUPPORT			PROG-TOTAL-PO			1,215.36

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$1,215.36 INCURRED BY CHILD SUPPORT. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

NOV 01 2010 DATE \_\_\_\_\_ CHAIR



Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2122150000-63110	ADMIN EXPENSE	200,106.00	50.1%	58,734.54	41,685.05	99,686.41	
	P1003557-PO# 11/01/10 -VN#025667			BUKER,KATE		1,458.68	
				CLOSING BALANCE	98,227.73		1,458.68
	DRUG COURT GRANT			PROG-TOTAL-PO		1,458.68	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$1,458.68 INCURRED BY DRUG COURT DISCRETIONARY GRANT. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.

B. BILLS UNDER \$10,000 TO BE PAID.

C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

**NOV 01 2010**

DATE \_\_\_\_\_ CHAIR

Account Number	Name	Yearly Prcnt Appropriation Spent	YTD Expenditure	Encumb Amount	Unencumb Balance	Inv/Enc Amount	Total
2121900000-67105	MOTOR VEHICLES	281,000.00	85.2% 237,885.47	1,769.00	41,345.53		
	P1003374-PO# 11/01/10 -VN#014534		MENARDS			353.02	
			CLOSING BALANCE		40,992.51		353.02
	SHERIFF'S VEH.		PROG-TOTAL-PO			353.02	

I HAVE EXAMINED THE PRECEDING BILLS AND ENCUMBRANCES IN THE TOTAL AMOUNT OF \$353.02 INCURRED BY SHERIFF'S VEHICLES. CLAIMS COVERING THE ITEMS ARE PROPER AND HAVE BEEN PREVIOUSLY FUNDED. THESE ITEMS ARE TO BE TREATED AS FOLLOWS

- A. BILLS AND ENCUMBRANCES OVER \$10,000 REFERRED TO THE COUNTY BOARD.
- B. BILLS UNDER \$10,000 TO BE PAID.
- C. ENCUMBRANCES UNDER \$10,000 TO BE PAID UPON ACCEPTANCE BY THE DEPARTMENT HEAD.

PUBLIC SAFETY & JUSTICE COMMITTEE APPROVES THE ABOVE. COM-APPROVAL \_\_\_\_\_ DEPT-HEAD

**NOV 01 2010**

DATE \_\_\_\_\_ CHAIR

Jim Doyle  
Governor

Rick Raemisch  
Secretary



Office of Detention Facilities  
3099 E. Washington Ave.  
PO Box 7925  
Madison, WI 53707-7925  
Telephone (608) 240-5050  
Fax (608) 240-3305

## State of Wisconsin Department of Corrections

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October 8, 2010

Sheriff Robert Spoden  
Rock County Sheriff's Department  
200 East Highway 14  
Janesville, WI 53545-9601

**Re: 2010 Annual Jail Inspection**

Dear Sheriff Spoden:

Pursuant to Wisconsin Statute §301.37(3), an inspection of the Rock County Jail was conducted on August 26<sup>th</sup>, 2010. The inspection compared the facility and its operations to the Department of Corrections Administrative Code Chapter DOC 350, applicable State Statutes, and best correctional practices. The process included a review of records, dialogue with staff and inmates, and a walkthrough of the building to assess the safety, sanitation, adequacy, and fitness of the facility. This correspondence will summarize the findings of the inspection.

### **SUMMARY OF FACILITY**

The Rock County Jail was originally constructed in 1987 and was subsequently remodeled in the spring of 2007. The main part of the jail consists of four (4) podular-remote housing units and the Pinehurst portion consists of two (2) housing units, both containing linear and direct supervision wings. The facility has a maximum rated capacity of 525 adult detainees and is not approved to hold juvenile offenders. On the date of the inspection, it was reported there were 419 inmates at the jail and 84 offenders on electronic monitoring.

### **INMATE RESOURCES**

- **EDUCATION** – GED/HSED instruction is provided six (6) hours per week in the pods, four (4) hours per week in Huber, and twelve (12) hours per week in the Rock County Education and Criminal Addictions Program (RECAP).

Educational staff also link those inmates with Huber privileges with appropriate individuals/schools to further their post-secondary education.

- **SUPPORT GROUPS** – AA meetings are held once a week.
- **LIFE SKILLS PROGRAMMING** – RECAP is a five (5) month program focusing on chemical abuse/cognitive skills programming, restorative justice, academic and vocational education, in addition to preparation for release into the community. Each individual receives extensive hours of programming every week, along with individual counseling hours. Inmates graduate from the program after completing all program requirements. Completion times vary based on individual ability, effort, and behavioral adjustment. RECAP programming components are as follows:
  - 1) Phase I (lessons 1-15) of the Cognitive Intervention Programs
  - 2) Education
    - Basic math, reading, writing
    - Computer skills
    - Employability skills
    - Financial Literacy & Life skills
    - Parenting and Family Relationships
    - GED/HSED or continued education
  - 3) Restorative Justice
    - Minimum 85 hours of community service
    - Victim Empathy
  - 4) AODA Treatment
    - Alternatives to drinking and drug use
    - Abstinence from mood altering substances (random drug testing)
    - Minimize risk of relapse
    - Identify substance abuse triggers and high-risk situations
    - Develop relapse prevention plan
  - 5) Domestic Violence
  - 6) Anger Management
- **RELIGIOUS SERVICES** – Non-denominational services are held on Tuesday evenings and Sunday mornings (as well as individual consultations). Specific denominational services can also be facilitated.
- **VISITATION** – Inmates are generally allowed one 20-minute visit per week. Visits are conducted both electronically and through non-contact booths.
- **COMMISSARY** – Canteen is provided by Swanson Services and inmates are allowed to order twice a week.
- **RECREATION** – Recreation is limited to dayroom activities (the outdoor rec yard was removed during the recent construction project).
- **READING MATERIALS** – Inmates have access to book carts upon request.

## SUMMARY OF OPERATIONAL CHANGES

*The following is a list of operational changes/improvements made since the CY09 inspection:*

- **New Contract** – Rock County now contracts with BI Incorporated for electronic monitoring services. The RCSO implemented new alert procedures in conjunction with the new provider. Additionally, the alcohol monitoring bracelets have been changed to incorporate both the alcohol monitoring and GPS functions in the same bracelet.
- **CERT Team** – The RCSO CERT team became operational in May 2010. Corrections Officer Cory Reilly attended CERT Instructor School at the Milwaukee County Sheriff's Office Academy in June 2010.
- **Housing Assignments** – The inmate housing plan was restructured:
  - A-Unit, sections 1&2 are now medium security.
  - C-Unit, sections 1&2 house maximum security inmates.
  - C-Unit, section 3 houses male disciplines.
  - C-Unit, section 4 houses male administrative confinement.
  - C-Unit, section 5 houses females disciplines/administrative confinement (when there are no females in this status, the unit is used for medical overflow and medium security overflow).
- **Due Process** – Consistent with Administrative Code requirements, due process hearings are now held at least 24 hours after an inmate receives notification of the alleged violation.
- **Undergarments** – The RCSO began issuing undergarments to inmates in December 2009.
- **Security Checks** – The RCSO established a comprehensive stand-alone security check/head count policy.
- **Grant Award** – The RCSO has been selected to participate in the grant-funded corrections initiative known as the "Workforce Pipeline Summit." It focuses on a variety of employment and workforce issues related to the ex-offender program.
- **RECAP** – Anytime a RECAP staff member transports a RECAP inmate(s) of the opposite sex to or from a worksite or appointment, the staff member now contacts F-Unit via their cell phone, advising F-Unit of the transport. The following information is included: number of inmates being transported, beginning mileage, and destination. Upon arrival at their destination, the staff member contacts the F-Unit Officer with the ending mileage.
- **Medications** – Trained and updated medication administration procedures for E-Unit and F-North.
- **Tasers** – Purchased for use by jail supervisors. Sgt. Burdick and C.O. Boeche went to Taser Instructor School at the Dane County Law Enforcement Training Center in April 2010.
- **Property Storage** – Implemented new in-cell property storage process for all inmates using plastic totes.
- **Healthcare Policies** – Began working with healthcare provider to create a medical policy manual.

- **Training** – Added training days in ‘classification’ and ‘diversion’ to the training regimen in the JTO program.
- **Painting** – Due to low inmate populations, maintenance repairs and repainting was completed of E-Unit and F-North.
- **Footwear** – Purchased “cros” for inmates to provide a more durable shoe.
- **Kiosk** – Upgraded Cobra Banker Kiosk in the front lobby.
- **Jail Evacuation** – The RCSO formed a Jail Evacuation Planning Committee to create a comprehensive plan. Additionally, five staff attended jail evacuation training in Green Bay (September 2010).

### JAIL EXPANSION PROJECT

Ground has been broken for implementation of Phase 1 of the jail expansion project. This will include the following:

- a new vehicle sallyport
- a new vehicle storage building
- a new booking area
- a new master control room
- some new kitchen equipment
- renovation of existing booking area into medical
- renovation of existing housing unit pod control rooms

It is anticipated completion will occur in fall of 2011.

### STAFF TRAINING

Staff receive a minimum of 24 hours training annually (this includes external, in-service, and roll call training initiatives). In-service topics for this inspection period included the following: Suicide Prevention, Medical, Shakedown/Searches, Restraint Board/Chair, and Report Writing.

### SUMMARY OF INSPECTION

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

The overall appearance of the facility was in satisfactory condition. A spot check of cell and housing unit mechanical devices revealed no deficiencies. There were no apparent signs of graffiti or property defacing. Due to lower inmate populations in CY10, cosmetic repairs and painting were completed in E-Unit and F-North. The only noted concern (specific to conditions of confinement) during my walkthrough of the jail was the strong smell of cigarette smoke in E-West. This is the 2<sup>nd</sup> year in a row smoke was detected.

Detainee feedback regarding the conditions of confinement was generally positive. The only repetitive complaints were specific to the lockout units. It should also be noted I received numerous positive comments regarding staff supervision. This feedback is noteworthy given there are considerable operational challenges due to the facility layout. As noted in previous inspections, the following details some of those shortfalls:

- ☑ **Kitchen**: The size of the kitchen is not commensurate with the needs of the facility. The kitchen was originally designed to prepare food for 300 inmates, not the current population. As a result, the majority of the open areas throughout the kitchen are crowded with stackable food trays and carts, creating a disadvantageous environment. In addition, there is not enough room for dry storage and freezer space.
- ☑ **Medical**: The health services unit is limited to one room and one remodeled closet to handle all medical needs. There is an adjacent medical housing unit available to male inmates only. Female inmates with medical issues are placed in the booking area (provided there is room). Historically, medical files are kept in locked cabinets in the hallway outside of the nurses' office. This is not an ideal setup, given the inconvenience to staff and congestion it creates.  
  
The future remodeling of this unit (associated with the jail expansion project) will greatly improve this area of operations.
- ☑ **Laundry**: It is generally difficult to maneuver through the clothing storage area, given how congested the room is with carts, bags, clothing, and other miscellaneous storage.
- ☑ **Visitation**: The visitation area is inadequate for a facility of this size. As a result, visits are generally limited to one 20-minute visit per week.
- ☑ **Programming Space**: The existing facility does not provide for any substantial programming space. Only one room is available in the main part of the jail, and on the Pinehurst side there are a few smaller rooms for RECAP.
- ☑ **Recreation Space**: There are no recreational opportunities outside of the dayrooms now (as the outdoor recreation area was removed as a result of the jail expansion project).
- ☑ **Storage/Inmate Property Space**: This is an ongoing concern, as property is stored in every available area within the jail.
- ☑ **Showers**: In the podular-remote housing units the showers are located by the control stations, outside of the unit (resulting in excessive inmate movement).

- Special Needs:** Parts of C-Unit and Booking are used for special needs/suicide observation. Inmates requiring use of these cells typically have mental health, medical, and/or chemical dependency issues. They tend to be more impulsive and staff intensive, in turn requiring greater supervision. Given the overall size of the population and that these cells are used for multiple purposes, there is a lack of adequate space for special needs inmates.

It is important to acknowledge the jail expansion project will assist in addressing this issue.

## **VIOLATIONS**

The CY09 inspection resulted in three (3) violations. During this inspection period (CY10), one (1) violation was documented. Jail administration and staff are to be commended for the marked improvement.

*The following violation was noted during this inspection process:*

- Administrative Code Chapter DOC 350.05(6)(c)** requires a detention strength bed to be provided for each occupant of a dormitory. Consistent with previous years, it was reported there were occasional issues in meeting this requirement during CY10.

*The following concerns were also noted during this inspection process:*

- Hourly Security Checks** – Administrative Code Chapter DOC 350.12(1) requires jail staff to conduct physical inspections of each inmate in all areas of the jail occupied by inmates at frequent and irregular intervals, during the day or night, to ensure that inmates are in custody and are safe. Best correctional practices, as well as RCSO expectations, dictate a physical observation at least once an hour.

A spot check of records revealed general compliance, with the majority of staff demonstrating a working knowledge of this expectation. Jail administration and staff are to be commended on the noted improvement from previous inspections. As was previously discussed, a comprehensive stand-alone security check policy was implemented during this inspection period.

Of noted concern, however, is the fact many of the hourly security checks on 1st and 2nd shifts are completed "visually" by the officer in the control rooms (confirmed by both staff and inmates). As was discussed during the inspection closeout, best correctional practices dictate physical observations should occur from within the housing units as often as possible to most effectively monitor the inmate climate, conditions of confinement, and individual wellbeing.

- Jail Policies** – There are several critical areas of jail operations that policy creation and/or updating is recommended (see attached inspection document for further detail).

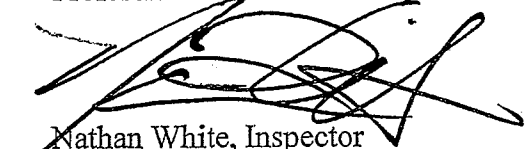
## **APPROVAL**

The Rock County Jail is approved to hold adult offenders with a maximum rated capacity of 525. This approval is contingent upon correction of the noted violation and the continued compliance with Chapter DOC 350 and applicable State Statutes. I would like to thank your staff, in particular Commander Gehl and Capt. Chellevoid, for their assistance and cooperation during the inspection. In addition, I would like to thank Rhoda Grosenick for having all the documents I requested well prepared and organized.



Please do not hesitate to contact my office should you have any questions regarding the CY10 jail inspection.

Professionally



Nathan White, Inspector

**DEPARTMENT OF CORRECTIONS**

- Cc: J. Russell Podzilni, County Board Chairman  
Sandra Kraft, County Board Vice-Chair  
Craig Knutson, County Administrator  
Phil Boutwell, Assistant County Administrator  
Jeff Kuglitsch, Corporation Counsel  
Ivan Collins, Public Safety and Justice Committee  
Barbara Barrington-Tillman, Chief Deputy  
Tom Gehl, Jail Commander  
Erik Chellevoid, Jail Captain  
Marty Ordinans, DOC/ODF  
File

**INMATE CLASSIFICATION AND HOUSING**

DOC 350.07 Double ceiling. A jail may use cells for double occupancy if all of the following conditions are met:

DOC 350.07 (1)(a) In jails that are constructed or substantially remodeled on or after March 1, 1990, to be used for double occupancy, a cell shall have a floor area of at least 70 square feet.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

DOC 350.07(1)(b) In jails that were constructed before March 1, 1990, and have not been substantially remodeled on or after March 1, 1990, to be used for double occupancy, a cell shall have a floor area of at least 54 square feet.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**The Rock County Jail was originally constructed in 1987.**

DOC 350.07(2) 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 county board and sheriff shall reduce any joint determinations to writing, signed by representatives of the county board and sheriff, and shall file the written joint determination 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 ceiling may not occur.

- ◆ A written agreement between the County Board and the Sheriff contains the following elements:
- ◆ That 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
- ◆ The signed written agreement is on file with the Department of Corrections

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

DOC 350.07(3), 302.36 Classification of prisoners. The sheriff, jailer, or keeper of a jail shall establish a prisoner classification system to determine prisoner housing assignments, how to supervise and provide services and programs to a prisoner, and what services and programs to provide a prisoner. The prisoner classification system shall be based on objective criteria, including a prisoner's criminal offense record and gender, information relating to the current offense for which the prisoner is in jail, the prisoner's history of behavior in jail, the prisoner's medical and mental health condition, and any other factor the sheriff, jailer, or keeper of a jail considers necessary to provide for the protection of prisoners, staff, and the general public.

- ◆ 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 secondary review process is in place by supervising personnel to review re-classification or appeals.
- ◆ Sufficient housing exists to meet classification guidelines for male and female inmates
- ◆ Inmates housed in the same cell shall have the same security classification and be properly segregated as required under s. 302.36, Stats.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.150 addresses this provision. The jail utilizes a decision tree system for an objective classification instrument. An initial inmate classification is completed upon booking and a primary classification is completed within 72 hours. Re-classifications and routine reviews are conducted according to policy. There are two (2) classification officers and one (1) supervisor designated for the facility.**

**It should be noted female housing options are fairly limited. One unit holds all classifications without Huber privileges and another hold those females with Huber privileges, inmate workers, and RECAP participants.**

**DOC 350.07(4) Except in an emergency, inmates shall be allowed out of their cells a minimum of 14 hours per day.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.07(5) At any given time, at least one cell or 15 % of a jail's total number of cells used for male prisoners, excluding receiving cells and holding rooms, whichever is greater and, at least one cell or 15 % of a jail's total number of cells used for female prisoners, excluding receiving cells and holding rooms, whichever is greater, may not be used for double occupancy.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.07(6) Receiving cells may not be used for double occupancy.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.07(7) When inmates are locked in their cells, jail staff shall physically observe each inmate in all areas of the jail containing double occupancy cells at least once every 60 minutes at irregular intervals.**

◆ Legible documentation of each check is made and retained

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

◆ Officers physically observe each inmate in all areas of the jail, at irregular intervals, at least once every 60 minutes

◆ Officers observe the condition of each inmate during checks

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.390 addresses this provision. A spot check of records revealed general compliance. Inmates also reported seeing staff (during lockdown hours) at least once every 60 minutes when questioned.**

**DOC 350.07(8) Each cell used for double occupancy shall have a dayroom in its immediate vicinity that is accessible to inmates. The dayroom shall have detention strength tables and seating for the number of occupants of the cells that have access to the dayroom.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Comments:

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**DOC 350.07(9) If a jail uses cells for double occupancy in a housing unit, the dayrooms in that housing unit may not be used for sleeping purpose.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Comments:

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

# SAFETY AND SECURITY PRACTICES

## DOC 350.10 Fire safety

DOC 350.10(1) Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers, fire attack equipment and self-contained breathing apparatuses which operate for at least 30 minutes. This equipment shall be placed in the jail in accordance with the advice of the local fire department.

- ◆ Fire extinguishers are properly maintained, with recorded time-dated inspection.
- ◆ Fire extinguishers are properly placed, secured, and easily accessible to staff.
- ◆ A fire extinguisher suitable for grease fires is provided in the kitchen.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Fire extinguishers and SCBA's were observed throughout the facility (including the kitchen). A spot check of fire extinguisher tags revealed they are being serviced regularly.**

DOC 350.10(2) Each jail shall develop written policies on fire protection, evacuation, including evacuation of persons with disabilities, and training of staff in equipment use and evacuation. The policies shall comply with local fire department recommendations.

- ◆ Jail staff can demonstrate proficiency in the use of fire attack and protection equipment.
- ◆ Jail staff can articulate or demonstrate the evacuation routes and policies of the jail.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.230 addresses this provision. Jail administration is encouraged to add a section in the policy which addresses ongoing staff training on equipment use and evacuation.**

DOC 350.10(3) The evacuation route developed as part of the evacuation policy under shall be posted in a conspicuous place for jail staff in the jail.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Evacuation routes are posted throughout the facility.**

DOC 350.10(4) The sheriff shall arrange for a fire inspection by the local fire department at least once every 6 months. Documentation of fire inspections shall be included in facility files.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Documentation from the Janesville Fire Department revealed compliance, with an initial fire inspection completed on 2/15/10. Follow-up inspections were completed on 6/2/10 and 8/16/10.**

**Additionally, I received a copy of the SCBA flowtests conducted by 5 Alarm Fire & Safety, LLC (6/8/10).**

DOC 350.12 Security

DOC 350.12(1) Jail staff shall conduct physical inspections of each inmate in all areas of the jail occupied by inmates at frequent and irregular intervals, during the day or night, to ensure that inmates are in custody and are safe. Inmates who have been identified by jail staff as having a special medical or mental health problem shall be physically observed at more frequent intervals. Each inspection shall be documented.

- ◆ All inmates are physically observed during each physical inspection.
- ◆ Closed Circuit Television (CCTV) monitoring and other non-direct forms of observation are utilized only to supplement physical inspections.
- ◆ Physical inspections take place at irregular intervals at least once every 60 minutes.
- ◆ Physical inspections of inmates who have special medical or mental health problems take place more frequently, or at least every 15 minutes.
- ◆ In housing units of multiple cells, officers are encouraged to complete physical inspections from within the housing unit.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.390 addresses this provision. A spot check of records revealed general compliance.**

**Of noted concern, is the fact many of the hourly security checks on 1st and 2nd shifts are completed "visually" by the officer in the control rooms (confirmed by both staff and inmates). As was discussed during the inspection closeout, best correctional practices dictate physical observations should occur from within the housing units as often as possible to most effectively monitor the inmate climate, conditions of confinement, and individual wellbeing.**

**Please reference DOC 350.19(5) for comments related to security checks of inmates on suicide watches.**

DOC 350.12(2) There shall be at least 3 complete sets of jail and fire escape keys, one set in use, one set stored in a safe place which is accessible only to jail personnel for use in an emergency and one set stored in a secure place outside the jail.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**As noted in the CY08 and CY09 inspections, the jail does not have a comprehensive stand-alone key control policy (addressing such topics as quantity, storage locations, accessibility, use, replacement process, etc.). It was reported the facility has one full crash set outside the secure perimeter and three others within.**

**Jail administration is once again encouraged to develop and implement such a policy.**

DOC 350.12(3) All jail personnel shall be given instructions concerning the use and storage of jail and fire escape keys and shall be held strictly accountable for keys assigned to them.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Staff become familiar with key use and storage during orientation and jail training.**

DOC 350.12(4) All jail personnel shall be familiar with the locking system of the jail and shall be able to release inmates promptly in the event of a fire or other emergency.

- ◆ The jail staff demonstrate a proficiency in operating all locks, doors, and releases.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policies #6.230 & #6.300 address this provision.**

DOC 350.12(5) The sheriff shall ensure that monthly inspections are made to determine if cell and fire escape locks and doors are in good working order. Each inspection shall be recorded in the jail log.

- ◆ All locks, doors, and emergency releases are in good working order.
- ◆ The remote security controls of doors and locks are all operable.
- ◆ All malfunctioning doors, locks, and releases are repaired in a timely manner.
- ◆ Each monthly inspection is documented and available for review.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.300 addresses this provision. A review of monthly inspection reports revealed general compliance. As was discussed during the inspection closeout and noted in the CY09 inspection report, best correctional practices dictate that staff test all doors/locks that inmates have regular access to or would use in the event of an evacuation (not just the medical and podular-remote housing unit mechanical releases).**

**Safety and Security - adherence to a security plan that includes -**

- ◆ Specified limits on the activities of non-security staff.
- ◆ Volunteers and other community members who service the jail are provided a security orientation and are made aware of the operational policies and procedures that affect their activities.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**It was reported background checks are completed on volunteers/program providers and expectations are provided during a formal orientation.**

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

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**It was reported and observed that radios and intercoms are working properly.**

- ◆ Accepted correctional practices are adhered to regarding the presence and securing of firearms, sharps, and other items that may be used as weapons in the facility.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.470 addresses this provision. Lock boxes are located at the entrances to the facility.**

- ◆ Periodic housing unit searches are completed and the results documented.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**It was reported various searches are completed on a weekly basis and documented in the jail log. As noted in the CY08 and CY09 inspection reports, the jail does not have a search/shakedown policy detailing staff expectations (e.g. how often searches are to be completed, what areas of the facility should be searched, methods of searching, inmate location during cell inspection, what to do with contraband found, proper documentation, etc.). Jail administration is once again encouraged to develop and implement such a policy.**

**DOC 350.14 USE OF FORCE – (See code for specific language.)**

- (1) 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.
- (2) Reports written and submitted to supervisor, jail administrator, or sheriff.

Compliance:

- Meets standard  
 Needs improvement  
 Non-compliant  
 Not reviewed

Verification:

- Policy and procedure manual review  
 Sample of facility records reviewed  
 Sight confirmation by inspector  
 Verbal confirmation by facility staff

- Previous compliance documented  
 Other (Specify)

Comments:

**Policy #4.160 addresses this provision. A review of records revealed compliance (documentation of a supervisory review was observed).**

**DOC 350.15 DISCIPLINE – (See code for specific language.)**

- (1) Every jail shall have written rules of behavior for inmates.
- Time of admission notified of jail rules and potential disciplinary actions for violations of rules.
  - Each inmate provided with a copy of the jail rules or jail rules posted in inmate areas.
- (2) Discipline for minor violation
- (a) Minor penalty is verbal, written or restriction or privileges for 24 hours or less.
- (b) Inmate informed of violation.
- (c) Inmate opportunity to make verbal statement about alleged violation.
- (d) Impose penalty if violation found to occur.
- (e) Supervisor informed of incident.
- If found violation to be major then handled in accordance with Sub. (3).
  - If found not violation occurred, charge dismissed and inmate informed.
- (f) Appeal process in place and process notification to inmate.
- (g) Information made part of inmate's file and entered into jail log.
- (3) Discipline for major violation
- (a) A major penalty 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 with s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor in 24 hours of incident.
- (c) Inmate notification of charges, right to hearing 24 hours in advance of hearing.
- (d) Due process hearing, inmate may waive hearing.
- (e) Impartial hearing officer or committee (not involved in incident.)
- (f) Inmate present at hearing and present evidence. Reason for inmate's absence documented.
- (g) Inmate right to present witnesses. Absence of witness documented.
- (h) Staff advocate if inmate illiterate or issues are complex.
- (i) Written decision to inmate prior to punishment administered.
- (j) Inmate notified right to appeal and appeal procedure.
- (k) Found no violation then removed from inmate file. Incident information made part of inmate file and entered in jail log.

Compliance:

- Meets standard  
 Needs improvement  
 Non-compliant  
 Not reviewed

Verification:

- Policy and procedure manual review  
 Sample of facility records reviewed  
 Sight confirmation by inspector  
 Verbal confirmation by facility staff

- Previous compliance documented  
 Other (Specify)

Comments:

**Policies #6.160 and #6.430 address this provision. A review of records revealed compliance (documentation of a supervisory review was observed).**



# HEALTH CARE

## DOC 350.09 Health Care.

### DOC 350.09 (1) The sheriff shall provide or secure necessary medical 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

#### Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

#### Comments:

**Healthcare services are available 24/7. Inmates are able to submit medical request slips to healthcare staff on a daily basis (completed slips were observed in individual files). Triage takes place at least once every 24 hours and all services rendered are documented. Access to care is outlined in the inmate rules.**

### DOC 350.09(2) No prescription medications or treatments may be administered unless prescribed by a physician. If a nurse or physician is not available, jail staff may deliver prescribed doses of oral medication at prescribed times.

- ◆ All prescription medications administered to inmates are prescribed by a physician.

#### Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

#### Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

#### Comments:

### DOC 350.09(3) Medical records shall be kept separate from other records and shall be maintained in a confidential manner in accordance with ss. 146.81 to 146.83, Stats., and any other applicable state or federal laws.

- ◆ Medical records are maintained separately from other inmate and jail records.
- ◆ Medical records are maintained in a secure and confidential manner.
- ◆ Medical records are accessible to medical staff, the jail administrator, and the administrator's designees.

#### Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

#### Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

#### Comments:

**As noted in the CY09 inspection report, there is no comprehensive stand-alone jail policy which addresses this provision (e.g. storage location, accessibility, contents, etc.). Jail administration is once again encouraged to develop such a policy.**

**Medical records are securely stored within the health services area. A spot check of individual records revealed completed medical/mental health intake screening forms, release of information, physician order forms, medical request slips, progress notes, medication administration records, lab results, incident reports, medical refusals, and health transfer summaries. It should be noted that due to space constraints, medical files are kept in locked cabinets in the hallway outside of the nurses' office. This is not an ideal setup, given the inconvenience to staff and congestion it creates. The future remodeling of the health services unit will greatly improve this area of operations.**

### DOC 350.09(4) Any medications kept at the jail shall be stored in a locked drug cabinet that is not accessible to inmates.

- ◆ Inmate medications are stored either in a locked, secured, medication cabinet or an appropriate, secure, health care storage area.
- ◆ The medication storage area is not accessible to inmates.

#### Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

#### Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

#### Comments:

**Policy #6.330 addresses this provision. Inmate medications are generally stored in locked cabinets within the health services unit and at E/F Unit control stations.**

**DOC 350.09(6) Inmates shall be served nutritionally balanced meals. Menus shall be kept for 90 days for review. An inmate shall be provided with a special diet if ordered by a physician**

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

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.400 addresses this provision. Alleged food allergies and medical diets are reviewed by the health authority. Ordered medical diets are noted in the inmate's file and communicated with the food service staff (special diet list was observed in the kitchen).**

**Please reference the food service section of this report regarding inmate meals and nutrition.**

**DOC 350.18 Inmate Health Screening and Care. The manual under DOC 350.17 shall contain certain policies and procedures for inmate health screening and care, including the following components:**

**DOC 350.18(1) Health screening form which is developed in conjunction with health care professionals and which is used at booking to obtain information relating to each inmate's medical and dental condition, medical illnesses or disabilities, mental illnesses, developmental disabilities, alcohol or other drug abuse problems and suicide risk.**

**DOC 350.18(2) Procedures for the documentation of health screening results, referrals made or health care provided and maintenance of documents 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, suicide risk.
- ◆ A health screening form is completed for each inmate booked into the facility.
- ◆ The health screening forms are reviewed by the health care provider and the jail administration for completeness, accuracy, legibility, and the appropriateness of the decisions made regarding referral, housing, classification, and other actions.
- ◆ The identity of the person who completes the health screening form is documented.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.320 addresses this provision. A pre-admission questionnaire along with a health assessment are conducted on each inmate (completed forms were observed in individual medical files).**

**DOC 350.18(3) Names, addresses and telephone numbers of health care providers or agencies who have agreed to provide emergency and other health care services for special needs inmates.**

- ◆ The names, addresses, and telephone numbers of identified health care professionals are available in a current policy and procedure manual or otherwise accessible to all jail staff.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.18(4) Procedures for the referral of an inmate to jail health care staff or to other agencies, which provide health care.**

- ◆ Detailed instructions for the referral of inmates for health care services are in the current policy and procedure manual and accessible to all jail staff.
- ◆ Health care referrals are made and documented on a specific health care referral form or in a medical communication log.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.110 addresses this provision.**

**DOC 350.18(5) Designation of staff who have the authority to make health care decisions, including emergency medical and dental care.**

**DOC 350.18(6) Non-emergency health care, including the use of an inmate's personal physician.**

- ◆ The names or positions of those staff members authorized to make these decisions are in the current policy and procedure manual and accessible to all jail staff.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**The responsible health authority is outlined in policy.**

**DOC 350.18(7) Schedule of inmate access to routine medical care.**

**DOC 350.18(8) Procedure for processing inmate medical requests, including written disposition.**

- ◆ 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.
- ◆ Inmate medical requests are filed on an official medical request form.
- ◆ Written disposition of medical requests are retained in inmate confidential medical files.
- ◆ An alternative means for inmates to access medical care if the inmates are unable to read or write is provided.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Advanced Correctional Healthcare is the medical provider for the jail. Nursing coverage is 24/7 and Physician coverage is approximately 4 hours/week. The process to access healthcare is outlined in the jail rules. It was reported if an inmate cannot read or write, the process will be explained to them. Inmates are able to request sick call slips from staff daily (completed medical request slips were observed in individual medical files).**

**DOC 350.18(9) Documentation in an inmate's confidential medical file of any referral and identification of the services provided, including emergency services.**

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

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**A spot check of individual records revealed completed medical/mental health intake screening forms, release of information, physician order forms, medical request slips, progress notes, medication administration records, lab results, incident reports, medical refusals, and health transfer summaries.**

**DOC 350.18(10) Provision of special diet if ordered by a physician.**

- ◆ Special diets ordered by a physician 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 physician.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.400 addresses this provision. Alleged food allergies and medical diets are reviewed by the health authority. Ordered medical diets are noted in the inmate's file and communicated with the food service staff (special diet list was observed in the kitchen).**

**DOC 350.18(11) Maintenance of agreements between the jail and providers of health care.**

- ◆ A current, written agreement for the provision of health care services which details the expectations of the facility staff regarding the provision of services to inmates is maintained.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.20 Control and Administration of Medications. The manual under DOC 350.17 shall contain policies and procedures relating to the control and administration of prescription and non-prescription medications, including the following components: DOC 350.20(1) 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.340 addresses this provision. Healthcare staff have primary responsibility for the review and inventory of all medications brought into the jail.**

**DOC 350.20(2) Inventory and secured storage of all medications brought into the jail.**

- ◆ Medications brought into the facility are documented.
- ◆ Medications are stored in a locked medication cabinet or locked medical room, which limits staff access and prohibits inmate access.
- ◆ 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**All medications brought into the facility are documented either on the incoming property form or on a medications log (administration may want to consider the use of a standard medication documentation/verification form). As previously noted, inmate medications are stored in locked cabinets within the health services unit and at E/F unit control stations.**

**DOC 350.20(3) Designation of staff who are authorized to administer or who are authorized to deliver medications to inmates.**

- ◆ The names or positions of those staff members authorized to administer medications are in the current policy and procedure manual and accessible to all jail staff.
- ◆ Staff members who administer or deliver medication to inmates have received relevant training, at least annually.
- ◆ Medication delivery is monitored and supervised by health care staff members.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policies #6.330 & #6.340 address this provision. The healthcare staff have primary responsibility for preparing and delivering medications to inmates (med pass occurs two times a day or as directed). However officers are responsible for delivering medications to inmates in E-Unit and F-North.**

**Consistent with best correctional healthcare practices, a review of in-service topics revealed staff received medication administration training during this inspection period.**

**DOC 350.20(5) Documentation of all medication administered or delivered to an inmate, including who prescribed the medication, who administered or delivered the medications and the date and time of administration or delivery. All refusals of recommended or prescribed medications by an inmate must be documented.**

- ◆ All medication documentation is complete, accurate, and legible.
- ◆ The name of the pharmacist or doctor, 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 identity of the staff member who administered or delivered the medication is documented.
- ◆ The medication administration and delivery records are reviewed by the health care provider and the jail administration for completeness, accuracy, and legibility.
- ◆ There are no unexplained gaps in the documentation and inmate refusals of medication are clearly indicated and documented.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**A spot check of the medication administration records revealed complete documentation. It was reported the nursing supervisor reviews the MAR's weekly.**

**DOC 350.20(6) Return of an inmate's medication inventoried at admission.**

**DOC 350.20(7) Inventory or disposal of unused medications upon the inmate's release or transfer.**

- ◆ The return of an inmate's medications is documented.
- ◆ Unused medications are 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.330 partially addresses this provision. It was reported unused medications not returned to the inmate or pharmacy are disposed of by healthcare staff (including a witness).**

**As noted in the CY09 inspection report, section A8 of the policy does not clearly articulate the disposal process (including the method of destruction, use of a standard medication disposal form, witness presence, etc.). Jail administration is encouraged to update the policy to reflect the aforementioned benchmarks and expectations.**

**DOC 350.21 Communicable disease control. The manual under DOC 350.17 shall contain policies and procedures relating to the care, treatment and supervision of inmates who may have communicable diseases, including the following components:**

- ◆ **DOC 350.21(1) Provision of treatment and supervision of inmates during isolation or quarantine under s. 143.05(6)(b), Stats.**
- ◆ **DOC 350.21(2) Documentation of the need for isolation or quarantine under s.143.05(6)(b), Stats., in the inmate's confidential medical file.**
- ◆ **DOC 350.21(3) Provision for laboratory screening for inmates who may have been exposed to a communicable disease if ordered by medical personnel.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.060 addresses this provision.**

**DOC 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff
- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.310 addresses this provision. Healthcare staff have primary responsibility for the completion of HTS (completed HTS were observed in individual medical files).**

# HIGH RISK SUPERVISION

## DOC 350.13 Administrative confinement.

**DOC 350.13(1)** In this section, "administrative confinement" means a nonpunitive, segregated confinement of an inmate in his or her cell or other isolated area solely because he or she is dangerous, to ensure personal safety and security within the jail.

- ◆ Administrative Confinement is not utilized as a form of discipline.
- ◆ A policy and procedure is developed and implemented consistent with this section.
- ◆ Staff members demonstrate a working knowledge of the application of the policy and procedure.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.270 addresses this provision.**

**DOC 350.13(2)** An inmate may be placed in administrative confinement only if the inmate's continued presence in the general population:

**DOC 350.13(2)(a)** Presents a substantial risk of physical harm to the inmate, another person or property;

**DOC 350.13(2)(b)** Threatens the security and order of the jail; or

**DOC 350.13(2)(c)** Inhibits a pending disciplinary investigation.

- ◆ The reasons for each administrative confinement (consistent with this section) are clearly documented.
- ◆ The inmate is informed of the reasons and conditions of the inmate's Administrative Confinement.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.13(3)** A jail staff member shall inform his or her immediate 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 immediate 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.

- ◆ The review and decision of the supervisor are documented and occur within 24 hours of administrative confinement.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**It was reported a jail supervisor must approve any placement in administrative confinement.**

**DOC 350.13(4)** An inmate's progress in administrative confinement shall be periodically reviewed by the jail staff member's immediate supervisor. 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.

- ◆ The reviews and decisions of the supervisor are documented.
- ◆ Policies are in place and followed that establish timely reviews by jail supervisory personnel.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Per policy, an inmate's progress in administrative confinement shall be reviewed by a jail supervisor every ten (10) days. The review shall be in written form and placed in the inmate's file.**

**DOC 350.13(5)** The reason an inmate is placed in administrative confinement and the length of time the inmate remains in administrative confinement shall be entered in the inmate's file and in the jail log by the jail staff member or his or her immediate supervisor.

- ◆ The time and date of placement on administrative confinement and return to general population are documented.
- ◆ The staff member who made the administrative confinement decisions is identified.
- ◆ The reasons for administrative confinement are documented and are based on administrative code criteria.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**It was reported this information is documented in the placement report, the jail log, and the inmate's file.**

**DOC 350.19 Suicide Prevention.** The manual under s. 350.17 shall contain policies and procedures relating to the supervision and housing of inmates who may be at risk of seriously injuring themselves, including the following components:

- ◆ Staff members receive training to ensure familiarization with suicide detection, prevention, and intervention policies and strategies.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #7.380 addresses this provision. Consistent with best correctional practices, records reflect staff received suicide prevention training during this inspection period.**

**DOC 350.19(1) Assessment of an inmate's suicide risk at booking and documentation of the results.**

- ◆ 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.
- ◆ Arresting or transporting officers are routinely asked if they believe the offender is a suicide risk.
- ◆ 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.320 addresses this provision. A pre-admission questionnaire along with a health assessment are conducted on each inmate (completed forms were observed in individual medical files). During this screening process, if the inmate's answers or behavior suggest a risk of suicidal ideation, then that automatically generates a new protocol for further assessment and evaluation.**

**DOC 350.19(2) Designation of person who may assess an inmate's level of suicide risk and who may authorize placement on and removal from a suicide watch status for inmates who are suicide risks.**

- ◆ Staff members responsible for making suicide risk decisions demonstrate knowledge of appropriate procedures for placement and removal of suicide observation status.
- ◆ Staff members demonstrate a working knowledge of suicide assessment and prevention practices.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Per policy, once the inmate has been placed in a suicide watch status, the watch status will remain until the case is reviewed by Crisis Intervention and/or the jail medical services staff and a recommendation for removal is made to an on-duty jail supervisor.**



**DOC 350.19(3) Identification of housing areas for inmates who are suicide risks.**

- ◆ Staff members are aware of the designated housing areas for housing at risk inmates.
- ◆ Housing assignments are routinely reviewed by a supervisor.

**Compliance:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**Comments:**

**It was reported and records verified that inmates placed in suicide observation status are generally housed in receiving.**

**DOC 350.19(4) Referral of inmates who are suicide risks to mental health care providers or facilities.**

- ◆ A current list of medical/mental health care providers is available to staff.
- ◆ Staff members are aware of how to contact and communicate with medical/mental health staff.
- ◆ Inmates who are identified as suicide risks are referred for service from medical/mental health professionals.
- ◆ All such referrals are thoroughly documented.
- ◆ All follow up actions by correctional and medical/mental health care professionals will be documented.
- ◆ All recommendations or orders for care are communicated appropriately to jail staff members.

**Compliance:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**Comments:**

**Crisis intervention services are provided on an as needed basis by Rock County Crisis. Ongoing mental health services are provided by Advanced Correctional Healthcare (a Social Worker is onsite 20 hrs/week and a Psychiatrist is onsite 4 hrs every other week).**

**Information is properly disseminated between shifts and documented. Per policy, applicable reports are forwarded to medical, crisis, the jail supervisor report board, the suicide report board, and the booking report board.**

**DOC 350.19(5) Supervision of inmates who are suicide risks, including frequency of observation and documentation of supervision.**

- ◆ Inmates identified as suicide risks are physically observed at frequent and irregular intervals.
- ◆ Inmates identified as high risk are physically observed at least every 15 minutes at irregular intervals.
- ◆ All physical observations are documented, including the identity of the staff member.

**Compliance:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**Comments:**

**A spot check of suicide watch records revealed general compliance.**

**DOC 350.19(6) Communication between health care and jail personnel regarding the status of an inmate who is a suicide risk.**

- ◆ 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:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**Comments:**

**As previously noted, applicable information is properly disseminated between shifts and documented.**

**DOC 350.19(7) Intervention of a suicide in progress, including first aid measures.**

**DOC 350.19(8) List of persons to be notified in case of potential, attempted or completed suicides.**

- ◆ 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.
- ◆ A better correctional practice: Staff have received training on emergency response, including the 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**First aid kits are maintained throughout the facility (staff were able to identify where they were located).  
Emergency cutdown tools were observed.**

**DOC 350.19(9) Documentation of actions and decisions regarding inmates who are suicide risks.**

- ◆ A supervisory review of the relevant documentation is completed.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

# RECORDS AND REPORTING

## DOC 350.11 Records and reporting.

**DOC 350.11(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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.11(2) JAIL LOG.** Each jail shall have a log which shall include the information required in ss. DOC 350.12 (1) and (5), 350.13 (5), and 350.15 (2) (g) and (3) (k). The log shall be maintained by shift on a daily basis.

- ◆ The log is legible.
- ◆ The log contains an accurate account of jail activities including, items such as:
  - Inmate housing assignments; inmate movement; inmate transportation; court appearances; work release movement; all other significant occurrences.
- ◆ The jail staff has access to the logs.
- ◆ The person who made each entry is identifiable.
- ◆ The logs are reviewed by supervisory staff for legibility, completeness, and accuracy.
- ◆ At a minimum, the log contains the following information:
  - Physical inspections of inmates at frequent and irregular intervals
  - Physical inspections of special needs inmates at more frequent intervals
  - Monthly lock, door, and emergency release inspections
  - Reason and length of time any inmate is held in administrative confinement
  - Information regarding incidents
  - Information regarding disciplinary decisions, including punishments.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**A log is maintained each shift.**

**DOC 350.11(3) STORAGE OF RECORDS.** Records shall be kept in a secure area. Juvenile records shall be kept separate from records of inmates 18 years of age or older and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**General inmate service files are maintained in administration.**

# 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(1)(b) The keeper of a lockup facility shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners. The keeper shall serve each prisoner with clean water, towels and food.

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(3)(b) The owner of a lockup facility shall furnish 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.
- ◆ Cleaning supplies are provided daily to the housing units.
- ◆ 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.
- ◆ The jail staff provide for the appropriate laundering of inmate clothing.
- ◆ Hallways are free of clutter and obstructions.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**The overall appearance of the facility was in satisfactory condition. A spot check of cell and housing unit mechanical devices revealed no deficiencies. There were no apparent signs of graffiti or property defacing. Due to lower inmate populations in CY10, cosmetic repairs and painting were completed in E-Unit and F-North. The only noted concern (specific to conditions of confinement) during my walkthrough of the jail was the strong smell of cigarette smoke in E-West. This is the 2<sup>nd</sup> year in a row smoke was detected.**

**Detainee feedback regarding the conditions of confinement was generally positive. The only repetitive complaints were specific to the lockout units.**

**It was reported inmate clothing is laundered once a week. Inmates have daily access to cleaning supplies.**

DOC 350.08 Sanitation and Hygiene.

DOC 350.08(1) Inmates assigned to the kitchen who prepare, handle or serve food shall bathe or shower daily;

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**If an inmate's appearance is not satisfactory to food service staff, they get sent back to their housing unit.**

**DOC 350.08(2) Blankets shall be laundered or sterilized before reissue. Blankets used with sheets shall be laundered at least every 3 months and blankets used without sheets shall be laundered at least weekly;**

**DOC 350.08(3) Sheets, pillowcases and mattress covers shall be changed and washed at least weekly;**

**DOC 350.08(4) Clean towels shall be issued to each inmate twice a week.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**It was reported blankets are laundered at least once every 3 months, bedding is laundered once a week, and clean towels are issued twice per week.**

**DOC 350.08(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;**

**DOC 350.08(7) Mattresses shall be at least 3 inches thick and of proper size to fit the bed.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**A spot check of mattresses revealed compliance. As always, staff should be routinely checking the conditions of inmate mattresses and reporting any deficiencies.**

**DOC 350.08(8) 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.08(9) 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.**

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Received at booking.**

**DOC 350.08(10) After 24 hours, inmates shall be notified that, upon request, they will 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 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

## INMATE SERVICES

**DOC 350.22 Mail.** The manual under s. DOC 350.17 shall contain policies and procedures relating to written contact between inmates and their families, friends, attorneys, the court system, government officials and others, including the following components:

- ◆ The procedures for the processing of inmate mail are clearly explained in the inmate handbook or rules.
  - ◆ A non-delivery of mail form is completed and delivered when mail is confiscated, destroyed, or rejected.
- DOC 350.22(1) Provision for staff inspection and reading of nonprivileged incoming and outgoing mail.**

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

**DOC 350.22(2) Delivery of all nonprivileged incoming mail.**

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

**DOC 350.22(3) 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.

**DOC 350.22(4) Delivery of all approved privileged mail.**

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

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policies #6.280 and #6.380 address this provision. Mail procedures are explained in the inmate rules. A non-delivery form is completed when applicable.**

**DOC 350.22(5) Inventory and disposition of contraband items found in mail.**

- ◆ Contraband items are inventoried and documented in the log.
- ◆ Contraband is promptly turned over to supervisory staff.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**DOC 350.22(6) Provision of postage to indigent inmates**

- ◆ Indigent inmates are provided postage according to facility policy.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Per policy, indigent inmates shall be advised that postage free mail will be provided to their attorney, the courts, and the Wisconsin Department of Corrections.**

**DOC 350.23 Visitation.** The manual under s. DOC 350.17 shall contain policies and procedures relating to visitation, including the following components:

**DOC 350.23(1) Establishment of a visiting schedule for family, friends, attorneys, and others.**

**DOC 350.23(2) Establishment of procedures for requesting visitation during nonscheduled times.**

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

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.460 addresses this provision. Inmates are generally afforded one 20-minute visit per week. Visits are conducted both electronically and through non-contact booths. Per policy, visitors who travel more than 25 miles one way may request an extended visit. It was reported jail supervisors have the discretion to approve.**

**DOC 350.23(5) Posting of visitation policies and procedures, including visitation schedule, in a place readily accessible to visitors and inmates.**

◆ Visitation rules and schedule are posted in a place accessible to all visitors and inmates.

**Compliance:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**Comments:**

**Posted in the lobby, housing units, inmate rule book, visitor's handbook, website, and via the telephone directory system.**

**DOC 350.23(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.

**DOC 350.23(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:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**Comments:**

**All visits conducted are documented in the visitation log.**

**DOC 350.24 Religious programming. The manual under s. DOC 350.17 shall contain policies and procedures relating to religious programming, including the following components:**

**DOC 350.24(1) Identification of religious organizations and clergy willing to conduct religious services in the facility.**

**DOC 350.24(2) Notification of inmates of the schedule of religious services available in the jail.**

- ◆ Inmates receive notification regarding what religious services are available in the facility, and when they are scheduled to occur.
- ◆ Staff demonstrate a knowledge of the procedure for assessing and responding to inmate requests for religious services.

**Compliance:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**Comments:**

**Policy #6.220 addresses this provision. Non-denominational services are conducted weekly (individual consultations can also be facilitated). Services are announced in the housing units.**

**DOC 350.24(3) Identification of religious items which 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.

**DOC 350.24(4) Provision of Bibles or Qurans upon request under s. 302.39, Stats.**

◆ If requested, inmates receive Bibles or Qurans.

**Compliance:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

**Comments:**

**DOC 350.25 Recreation The manual under s. DOC 350.25 shall contain policies and procedures identifying the recreational activities which are available and when they are scheduled**

**Compliance:**

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

**Verification:**

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.180 addresses this provision. Inmates are limited to using the dayrooms (as the outdoor recreation area was removed due to recent construction).**

**DOC 350.26 Reading materials.** The manual under s. DOC 350.17 shall contain policies and procedures relating to access to reading materials, including the following components:

**DOC 350.26(1) Provision of reading materials of general interest, such as books, newspapers and magazines, for inmates.**

◆ Inmates have access to limited reading materials, including periodically, newspapers, and books.

**DOC 350.26(2) Identification of reading materials which are prohibited for inmates because their content creates a security risk.**

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

**DOC 350.26(3) Inspection of reading materials 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:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.250 addresses this provision. Inmates have access to book carts upon request.**

**DOC 350.27 Canteen** The manual under s. DOC 350.17 shall contain policies and procedures for the establishment and use of canteen, vending or other similar services for inmates.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Policy #6.050 addresses this provision. Canteen is provided by Swanson Services and inmates are allowed to order weekly.**



## FOOD SERVICE

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.

- ◆ Three well cooked, wholesome meals are provided to each inmate daily.
- ◆ An annual review of the menus and meals is conducted by a dietitian.
- ◆ The results of the dietitian review are documented, and corrective action is taken when recommended.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Food service is provided by Aramark Correctional Services, Inc. Meals are prepared onsite by both inmate workers and Aramark food service staff. On the date of the inspection, the overall appearance of the kitchen was in satisfactory condition. As noted in previous inspections, the size of the kitchen is not commensurate with the needs of the facility. The kitchen was originally designed to prepare food for 300 inmates, not the current population. There is not enough room for dry storage and freezer space. Likewise, the kitchen is crowded with stackable food trays and carts.**

**On a positive note, the jail renovation project included some work in the kitchen. This included the replacement of ovens, dishwasher, and grease trap.**

**State Statute as well as Administrative Code DOC 350.09(6) requires inmates to be served nutritionally balanced meals. On the date of the inspection, I received a copy of the food service menu which is cycled through every four (4) weeks. The menu had been signed by a Registered Dietician (Johnson, RD, LDN #815923) which verified that food content, appearance, and nutritional needs are appropriate. It was reported that the average daily caloric intake is approximately 2900.**

Wisconsin State Statute 302.37(1)(b) The keeper of a lockup facility shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners. The keeper shall serve each prisoner with clean water, towels and food.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

- ◆ Plumbing systems, including floor drains and traps, are kept clean, free of odor, and free of pests, and are prohibitive of back-siphonage.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

- ◆ Food temperatures are properly maintained during chilling, thawing, and service.
- ◆ No spoiled, out-dated, or tainted food is stored or served.
- ◆ People who work in food service areas wear clean garments and clean caps or hairnets, and keep their hands clean at all times when engaged in the handling of food, drink, utensils, or equipment.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff

- Previous compliance documented
- Other (Specify)

Comments:

**Inmate food service workers were observed wearing head/beard nets.**

- ◆ Food on trays or in bulk shall be either transported in covered carts or be protected in transit with covers designated for that purpose.
- ◆ Food and drink is stored in a clean, well-ventilated place, protected from flies, dust, vermin, overhead leakage, sewage backflow and other contamination.
- ◆ Staple foods and bulk supplies are stored off the floor in durable, easily-cleanable, food-grade, metal or plastic containers with tight fitting covers, once the original container or package is opened.
- ◆ Food is stored at least 6 inches off the floor on clean surfaces at elevations sufficient to permit cleaning underneath and to protect the food from splash or other contaminations.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff
- Previous compliance documented
- Other (Specify)

Comments:

- ◆ Tables, cooking and working surfaces and contact surfaces of equipment are thoroughly cleaned after each use.
- ◆ Multi-use utensils are thoroughly cleaned after each use.
- ◆ Proper cleaning and sanitizing of all utensils, food preparation, and food service equipment and trays is completed after each use.
- ◆ Walls, floors, and ceilings of all rooms in which food or drink is stored, prepared, or served, or in which utensils are washed are clean and in good repair.
- ◆ Ventilation fans, ducts, and screens, and oven hoods and ducts are kept clean and free of grease.
- ◆ All chilling, refrigeration, and freezing equipment is kept clean, free from rust and deterioration, and in good working order.
- ◆ Dishwashing equipment is properly maintained and utilized, and sanitary dishwashing procedures are followed.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff
- Previous compliance documented
- Other (Specify)

Comments:

- ◆ Garbage containers are emptied daily and are kept clean.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff
- Previous compliance documented
- Other (Specify)

Comments:

- ◆ If inmates have access to the food service area, all sharp instruments are inventoried after inmate access to the area, and securely stored.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff
- Previous compliance documented
- Other (Specify)

Comments:

**Sharps are returned to a secure lock box and an accountability sheet is utilized.**

- ◆ Inmate workers are supervised throughout all aspects of food preparation and service.

Compliance:

- Meets standard
- Needs improvement
- Non-compliant
- Not reviewed

Verification:

- Policy and procedure manual review
- Sample of facility records reviewed
- Sight confirmation by inspector
- Verbal confirmation by facility staff
- Previous compliance documented
- Other (Specify)

Comments: