

BILL HASLAM GOVERNOR

## STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE TENNESSEE CORRECTIONS INSTITUTE

DAVY CROCKETT TOWER 500 JAMES ROBERTSON PARKWAY NASHVILLE, TENNESSEE 37243 (615) 741-3816 FAX: (615) 532-2333 BETH ASHE EXECUTIVE DIRECTOR

August 17, 2016

Sheriff Eric Watson Bradley County 2290 Blythe Ave. Cleveland, Tn. 37311

Re: Bradley County Justice Center

Dear Sheriff Watson:

The Tennessee Corrections Institute recently conducted the annual inspection for the above named facility. The inspection revealed that this facility does not meet all the applicable minimum standards.

A re-inspection will be conducted on or about **October 6, 2016** to determine if the deficiencies have been corrected. The final report will be presented to the Board of Control at its next meeting.

The Detention Facility Specialist assigned to your region is available for any assistance that you may need.

Beth Ashe

**Executive Director** 

Enclosure – Inspection Report

Cc: Gary Davis, County Mayor

William R. Kane, Detention Facility Manager

File



## TENNESSEE CORRECTIONS INSTITUTE INSPECTION REPORT

| A Initial Inspection  | Re-ms                  | spection                |                |
|---|------------------------|-------------------------|----------------|
| Name of Facility: Bradley County Justice Center                                       |                        | Туре                    | of Facility: I |
|   |                        |                         |                |
| Location: 2290 Blythe Avenue  | Cleveland              | 37311                   | Bradley        |
| Street  | City                   | Zip                     | County         |
| D. 11t. A Justiciana Die Water  | Chou; Cf               | (423) 728-              | 7200           |
| Facility Administrator: Eric Watson Name  | Sheriff<br>Title       | Phone Nun               |                |
| ivaine  | Title                  | Thone Ivan              | 1001           |
| Facility Manager: Gabe Thomas   | Captain                | (423) 728-              |                |
| Name  | Title                  | Phone Nun               | nber           |
|   | 1.5                    | (400) 700               | 71.41          |
| County Mayor, City Mayor, Gary Davis  | County Mayor           | (423) 728-<br>Phone Nur |                |
| or city Administrator: Name   | Title                  | Phone Nun               | nber           |
| Location: 155 Broad Street, P.O. Box 1167   | Cleveland              | 37364                   | Bradley        |
| Street  | City                   | Zip                     | County         |
|   | WIII B. K. DEM         |                         |                |
|   | William R. Kane, DFM   |                         |                |
|   | Signature of Inspector |                         |                |
|   | August 15, 2016        |                         |                |
|   | Date Of Inspection     |                         |                |
|   | October 6, 2016        |                         |                |
|   | Date of Re-Inspection  |                         |                |
| Certify Do not certify  Re-inspection required  Certify with approved BOC POA (New/Up | odated)                |                         |                |
|   | ,                      |                         |                |

## **INSPECTION REPORTING FORM**

| Date: August 15, 2016 Inspectors: William R. Kane, DFM and Tonya West, DFS  |   |  |  |  |  |
|---|---|--|--|--|--|
| F   | Duadlay County Ivotice Contes   | Type: I  |  |  |  |
| Facility Name:  | Facility Name: Bradley County Justice Center Type: I  |  |  |  |  |
| Not Overcrowded Overcrowded/County prisoners (plan attached) Overcrowded /County/State Prisoners (Attach ADP Calculations) (The facility ADP is 27% above the certified capacity.) Currently operating under TCI approved plan Sufficient progress made on plan of action Status change recommended Capacity Change       |   |  |  |  |  |
|   | Name  | Title  |  |  |  |
|   | Gabe Thomas   | Captain  |  |  |  |
| Information   | James Gregory   | Lieutenant   |  |  |  |
| provided by:  | Christi Walls   | Lieutenant   |  |  |  |
|   | Bo Lewis  | Sergeant   |  |  |  |
|   | Royce Jackson   | Maintenance  |  |  |  |
|   |   |  |  |  |  |
| 1400-104 Physical Plant:  (6) There are several cells throughout all the housing areas that do not have access to hot or running water in their sinks. (7) The facility shower ratio is not in compliance in the A, B, C, D, G, H, L, and M housing areas. This is due to showers needing repaired in all of these areas. |   |  |  |  |  |
| (4, 6) Booking:   | The booking cells are being used as housing due to overcrowding   | and lack of supplies to dress out the inmates in       |  |  |  |
| uniforms and su   | apply them with mattresses. The square footage ratio and shower ra                                      | tios are not met in this area. This area is being used |  |  |  |
| to house an ave   | rage of 40 or more inmates for several weeks at a time and has not                                      | been Certified by T.C.I. as inmate housing.            |  |  |  |
| Additional Con  |   |  |  |  |  |
|   | ity has a contract with Fire and Life Safety America to check and se                                    |  |  |  |  |
|   | ity has a contract with Simplex Grinnell to check and service the Fi                                    |  |  |  |  |
| Note: The emer  | gency generator is checked weekly by the facility maintenance dep                                       | partment.  |  |  |  |
| 1400-105 Administration/Management:  Deficiencies Found: Yes No X   |   |  |  |  |  |
| Additional Con  | nments:   |  |  |  |  |
| Note: The Police  | by and Procedure was signed and approved by Sheriff Eric Watson   | on March 01, 2016.                                     |  |  |  |
| Note: The facil   | ity evacuation routs and emergency plans were approved by Fire M ccupancy was issued on April 22, 2004. | farshal Ben Atchley on December 01, 2015. The          |  |  |  |
| 1400-106 Per  | sonnel:   | Deficiencies Found: Yes No X                           |  |  |  |
| Additional Con  | nments:   |  |  |  |  |
| Additional Confinence.  |   |  |  |  |  |
| 1400-107 Security:  Deficiencies Found: Yes X No  |   |  |  |  |  |
| <ul><li>(7) The facility emergency keys have been updated and are identifiable by sight. They also need to be identifiable by touch.</li><li>(9) There is no documentation showing that the facility Tasers, Chemical Agents, and Security Equipment are being inventoried and</li></ul>                                  |   |  |  |  |  |
| tested on a quarterly basis.  |   |  |  |  |  |
| (12) The facility cleaning supplies and equipment are not being inventoried in the Laundry and Food Service areas.  |   |  |  |  |  |
| (22b) There is no documentation showing that the facility firearms are being inventoried and tested on a quarterly basis.   |   |  |  |  |  |
| Additional Comments:  |   |  |  |  |  |
| Note: Fire and Life Safety America checked and serviced the facility fire extinguishers on November 23, 2015.   |   |  |  |  |  |
| <b>Note:</b> Fire and Life Safety America checked and serviced the Kitchen Hood and Fire Suppression System on February 11, 2016. The Kitchen Hood was cleaned by Hoodz Int., LLC on March 10, 2016.  |   |  |  |  |  |
| Notes Fire and  | vas cicaned by moods int., LLC on Water 10, 2010.   | ctem on May 23, 2016                                   |  |  |  |
| Note: Fire and Life Safety America checked and serviced the facility Sprinkler System on May 23, 2016.  |   |  |  |  |  |
| Note: Simplex Grinnell checked and serviced the facility Fire Panel on February 17, 2016.   |   |  |  |  |  |

| 1400-108 Discipline: Deficiencies Found: Yes X No  |  |  |  |  |
|--|--|--|--|--|
| (1) There is no documentation showing that the inmates are being provided the Disciplinary Rules and Sanctions during the booking                                    |  |  |  |  |
| process.   |  |  |  |  |
| Additional Comments:   |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 1400-109 Sanitation/Maintenance:  Deficiencies Found: Yes X No   |  |  |  |  |
| (1) Control Room: Camera C-179 is not working and needs repaired.  |  |  |  |  |
| (1) Food Service: The entire food service area and storage areas including the hallway leading to the food service area had standing                                 |  |  |  |  |
| water that originated from the dishwashing area. Tiles on the floor need replaced, light and vents need cleaned. The trash is blocking                               |  |  |  |  |
| the back exit and needs to be removed and disposed of. The mop closet off the dishwashing area needs the standing water removed                                      |  |  |  |  |
| and area cleaned. The latch on the cooler door needs repaired. The excessive ice in the freezer needs to be removed. Some vents need                                 |  |  |  |  |
| to be cleaned and painted.   |  |  |  |  |
| (1) Booking: All of the cell and holding areas need cleaned and most need painted. There are several lights that need to be cleaned.                                 |  |  |  |  |
| There are several sinks that do not have hot or running water that need repaired. There are several toilets that need repaired. The                                  |  |  |  |  |
| shower needs to be cleaned and painted. The drain in Cell-6 is clogged.  |  |  |  |  |
| (1) Main Laundry: The entire laundry area needs to be cleaned.   |  |  |  |  |
| (1) All Pod Areas: All of the inmate living areas, day rooms, showers, toilet areas, and stairs need to be cleaned. There is mold,                                   |  |  |  |  |
| mildew, and other residue in most of the showers that needs to be cleaned. All of the shower floor areas need painting as well as the                                |  |  |  |  |
| other areas that are paintable. All of the cell areas need the excessive items and pictures on the walls removed. G-Pod laundry has hole                             |  |  |  |  |
| between washer and dryer that needs repaired. The G-Pod Recreation Area door lock needs to be repaired. The key will not open the                                    |  |  |  |  |
| door which is a fire egress.  (1) All Pod, Hall, and Rec. Area Lights: All of the inmate living areas, day rooms, hall areas and recreation areas had several lights |  |  |  |  |
| that need replaced and or repaired. There were several light covers that also needed cleaned and or replaced as well as missing screws                               |  |  |  |  |
| in the fixtures in all of these areas.   |  |  |  |  |
| (1) Showers: There were showers that needed repaired in A, B, C, D, G, H, L, and M housing areas. There is a large hole in the                                       |  |  |  |  |
| ceiling of one of the showers in D-Pod that needs repaired. Half of the handicap shower heads are missing and only the long metal                                    |  |  |  |  |
| hose remains which can create a serious security hazard.   |  |  |  |  |
| (1) Sinks and Toilets: There were several sinks that did not have hot or running water in all of the inmate housing areas that need                                  |  |  |  |  |
| repaired. There were several toilets that needed repaired in all of the housing areas.   |  |  |  |  |
| (1) Painting: There are several inmate living/cell areas that need painting as well as some day room area walls and floors.  |  |  |  |  |
| (1) Electrical Cords: There are several electrical, coaxial, and extension cords, to the TV's, DVD Players, and Microwaves that need                                 |  |  |  |  |
| to be secured in several of the inmate day room areas.   |  |  |  |  |
| (1) Windows: E-Pod, Cell 426 door window needs replaced. F-Pod, Cell 446 door window needs replaced and Rec. Yard 456 door   |  |  |  |  |
| window needs replaced. G-Pod, Cell 450 and 456 door windows need replaced. H-Pod, Cell 466 door window needs replaced.   |  |  |  |  |
| Additional Comments:   |  |  |  |  |
| Note: The facility has a contract with Cooks Pest Control to provide pest control service on a monthly basis. The last service was                                   |  |  |  |  |
| conducted on July 26, 2016.  |  |  |  |  |
|  |  |  |  |  |
| 1400-110 Food Services: Deficiencies Found: Yes X No   |  |  |  |  |
| (1) The quarterly menu evaluations are not being conducted.  |  |  |  |  |
| (5) The menu substitutions are not being recorded on the meals served logs.  |  |  |  |  |
| (10) The refrigerator and freezer temperature logs are not being filled out on a consistent basis.   |  |  |  |  |
| (12) The food products in the food storage areas are not being stored at least 6-8 inches off the floor.   |  |  |  |  |
| (13) There were chemical agents present in the food preparation area.  |  |  |  |  |
| (14) The culinary equipment is not being inventoried on a consistent basis.  |  |  |  |  |
| Additional Comments:   |  |  |  |  |
| Note: The facility has a contract with Trinity Food Services to conduct the food service operation.  |  |  |  |  |
| Note: The menu pattern was approved by Margaret Ann Giunta LDN (license expires December 31, 2017) on November 12, 2015.   |  |  |  |  |
| This menu pattern was started by Trinity Food Service on February 25, 2016.  |  |  |  |  |
|  |  |  |  |  |
| 1400-111 Mail & Visiting: Deficiencies Found: Yes X No   |  |  |  |  |
| (5) There is no documentation showing that the inmates are being notified of rejected mail.  |  |  |  |  |
| Additional Comments:   |  |  |  |  |
|  |  |  |  |  |

| 1400-112 Inmate Programs & Activities:   | Deficiencies Found: Yes No X  |  |  |  |
|--|---|--|--|--|
| 1700 I III Illimate I rograms es reservices  |   |  |  |  |
| Additional Comments:   |   |  |  |  |
|  |   |  |  |  |
| 1400-113 Medical Services:   | Deficiencies Found: Yes X No  |  |  |  |
| (7) The medical intake screening questions are not being filled out on a consistent basis during the Booking/Intake process. (10) There is no consistent documentation showing that the inmates are being informed of the medical copays, sick call, and the   |   |  |  |  |
| grievance process during the Booking/Intake process.   |   |  |  |  |
| (26) The medical supplies/equipment is not being inventoried on a consistent basis   | S.  |  |  |  |
| Additional Comments:   |   |  |  |  |
| Note: The facility has a contract with QCHC (Quality Correctional Health Care) to provide all the inmate medical services.   |   |  |  |  |
| Note: The Medical Protocol/Policy and Procedure was signed and approved by Dr aid kit approval letter was reviewed and approved by Dr. Johnny Bates MD on Fel Bates MD, Ashlei Porter RN, CDO, Lee Carter MD, Meaghan Speer RN, Lynn Ca Brenda Roberts LPN, Tasha Bowers LPN, and April Kinser LPN are up to date an Note: The annual meeting with the facility and health care provider was conducted   | bruary 17, 2016. The medical license for Dr. Johnny arter APN, Tara Callahan LPN, Angela Martin LPN, and on file. |  |  |  |
| and Superintendent Allen Walsh on January 27, 2016. The facility also meets with QCHC on a monthly basis to review operational needs.  |   |  |  |  |
|  |   |  |  |  |
| 1400-114 Admission, Records and Release:   | Deficiencies Found: Yes No X  |  |  |  |
| Additional Comments:   |   |  |  |  |
| Additional Comments.   |   |  |  |  |
|  |   |  |  |  |
| 1400-115 Hygiene:  | Deficiencies Found: Yes X No  |  |  |  |
| (1a, b, c, d) There is no documentation showing that the inmates are receiving any   | clothing during the Booking/Intake process.   |  |  |  |
| (6a, b, c, d, e) There is no documentation showing that the inmates are receiving a  | a mattress, blanket, sheet, or bath size towel.   |  |  |  |
| (6b) There is no documentation showing that all of the facility mattresses are being   | g disinfected on a quarterly basis.   |  |  |  |
| Additional Comments:   | 5   |  |  |  |
|  |   |  |  |  |
| 1400-116 Supervision of Inmates:  (1) The facility security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not being conducted within an hour from the security check logs are not check logs. | Deficiencies Found: Yes X No  |  |  |  |
| documentation reviewed is very vague and does not include a description of what  | is going on in the area checked.  |  |  |  |
| (1) The suicide observation and restraint chair checks are not being conducted wit documentation is very vague. The forms that are being used by the officers have the for use by the facility Administration.   | hin the specified time parameters. The  |  |  |  |
| Additional Comments:   |   |  |  |  |
|  | "   |  |  |  |
| 1400-117 Classification:   | Deficiencies Found: Yes No X  |  |  |  |
| Additional Comments:   |   |  |  |  |
| Note: The facility classification process is very difficult to achieve due to the over   | rcrowding situation throughout the facility.  |  |  |  |

|                 | X Initial Annual Report | Re-inspection |
|-----------------|-------------------------|---------------|
|                 | Name:                   | Title:        |
| Exit Interview: | Gabe Thomas             | Captain       |
|                 | Christi Walls           | Lieutenant    |
|                 | Bo Lewis                | Sergeant      |

## Comments:

Recommend for Re-Inspection on October 6, 2016; this is due to the deficiencies listed in the report. Most of the deficiencies listed in the report are due, in large part, to the continued overcrowding situation and a shortage of staff at times to fill all the designated Post on a consistent basis. This was a team Inspection conducted by William R. Kane, DFM and Tonya West, DFS. The Captain, Lieutenants, and staff were very professional during the Inspection process. Report submitted by William R. Kane, DFM

Strongly Recommend: The facility purchase temporary correctional grade stack type bunks to be given to all the inmates sleeping on the floor with mats.

**Commend:** The Mayor, County Commission, and Sheriff on breaking ground in July of 2016 on the 127-Bed addition to help reduce the overcrowding situation. The expected completion date is April of 2017.

Note: The Tennessee Corrections Institute is authorized to grant this facility an extension not to exceed 60 days from the initial inspection to comply with minimum standards. No additional extensions may be granted. If applicable, a re-inspection will be conducted within 60 days and a recommendation will be made to the Board of Control. TCA 41-4-140, (4) (b) (1)