

STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE TENNESSEE CORRECTIONS INSTITUTE

BILL LEE GOVERNOR

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

June 24, 2019

Sheriff Steve Lawson Bradley County 2290 Blythe Avenue Cleveland, TN. 37311

Re: Bradley County Justice Center

Dear Sheriff:

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 **August 15, 2019** 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.

Sincerely

William Wall Deputy Director

Cc: Gary Davis, County Mayor

William R. Kane, Detention Facility Specialist

File



TENNESSEE CORRECTIONS INSTITUTE INSPECTION REPORT

X Initial Inspection	Re-I	nspection
Name of Facility: Bradley County Justice Center		Type of Facility:
Location: 2290 Blythe Avenue	Cleveland	37311 Bradley
Street	City	Zip County
Facility Administrator: Steve Lawson	Sheriff	(423) 728-7300
Name	Title	Phone Number
Facility Manager: Allen Walsh	Captain	(423) 728-7370
Name	Title	Phone Number
County Mayor, City Mayor, Gary Davis	County Mayor	(423) 728-7141 Phone Number
or city Administrator: Name	Title	Phone Number
Location: 155 Broad Street, (P.O. Box 1167)	Cleveland	37364 Bradley
Street	City	Zip County
	William R. Kane, DFM	
	Detention Facilities Spe	ecialist(s)
	June 20, 2019	
	Date Of Inspection	
Certify		
Do not certify		
X Re-inspection required Certify with approved BOC POA (New/U	pdated)	

INSPECTION REPORTING FORM

Date: June	Date: June 20, 2019 Inspector: William R. Kane, DFM & Tonya West, DFS			
Facility Name	: Bradley County Justice Center	Type: I		
Not Overcrowded Overcrowded/County prisoners (plan attached) X Overcrowded /County/State Prisoners (Attach ADP Calculations) Currently operating under TCI approved plan Capacity Change (The facility certified capacity changed from 430-male & 76-female, totaling-506 to 444-male & 66-female, totaling-510)				
Information provided by:		Title		
provided by	Bill Dyer	Captain		
	Gwen Beavers	Lieutenant		
	Anderson Sanders	Lieutenant		
	Justin Miller	Sergeant		
	Casey Allen	Sergeant		
	Hollis Creel	Maintenance		
	Carrie Colewell	RN/HSA with QCHC		
	Will Decomits	Trinity Services		
1400-104 Physical Plant: Obeficiencies Found: Yes X No (3) The inmate square footage ratio is not in compliance in male inmate housing (C-Pod, D-Pod, E-Pod, F-Pod, G-Pod, & I-Pod) and female inmate housing (H-Pod). (8) The inmate shower ratio is not in compliance in H-Pod due to the female inmate overcrowding.				
Additional Co				
Note: The facility has a contract with Fire & Life Safety America to check & service the fire extinguishers, sprinklers (serviced 11/22/18), & kitchen hood (serviced 6/10/19). The facility has a contract with Johnson Control to check & service the Fire Panel with the last service on 1/2/19. Note: The emergency generator is checked weekly by the facility maintenance department. The generator is serviced annually by				
Stowers Mach	inery with the last service on February 8, 2019.			
1400-105 Administration/Management: Obegin Deficiencies Found: Yes X No (7) The facility evacuation routes and emergency plans were last approved by Jeremy Tipton DSFM on March 23, 2018 and need to be updated.				
Additional Comments: Note: The policy & procedure was signed & approved by Sheriff Steve Lawson on September 1, 2018.				
	e drills were in compliance through the May of 2019.	on September 1, 2018.		
Note: The fire	drills were in compliance through the May of 2019.			
1400-106 Personnel: (4) The required facility Orientation Training had not been completed by 5 of the 20 QCHC nurses currently working in medical. Additional Comments:				
1400-107 Security: Deficiencies Found: Yes X No				

CI-0047 (Rev. 11/2016) RDA No. 2885

1400-108 Discipline: Deficiencies Found: Yes X No (2) The immates are not receiving information on the facility rules/sanctions during the booking/intuke process on a consistent busis. (56,56,67) The facility immate disciplinary process is not being conducted within the time parameters and or the documentation being filled out on a consistent basis. Additional Comments: Deficiencies Found: Yes X No (1) Booking: (1) Food Services: The refrigerator floor needs to be repaired. The freezer seal on the door needs to be replaced. (1) Booking: (1) Food Services: The refrigerator floor needs to be repaired. The freezer seal on the door needs to be replaced. (1) Booking: (1) Food Services: The refrigerator floor needs to be repaired. The freezer seal on the door needs to be replaced. (1) C-Pod: The glass needs to be replaced in cell door 298. (1) E-Pod: The glass needs to be replaced in cell door 294. (1) E-Pod: The glass needs to be replaced in cell door 244. The toiled in cell 225 needs to be repaired. (1) F-Pod: The rof lack in cell-445 needs to be repaired. At least the needs to be repaired. The glass needs to be replaced in cell door 442. & 447 along with the outside window inside cell 443. (1) E-Pod: The rof lack in cell-445 needs to be repaired at least needs to be repaired. The glass needs to be replaced in cell door 442. & 447 along with the outside window inside cell 443. (1) B-Pod: The rof lack in cell-445 needs to be repaired along with a shower that is leaking. (1) N-Pod & O-Pod: The unit sinks do not have cold water valves to supply cold water to the immates. Recommend adding water formation to each unit to restolve issue. (1) B-Pod through L-Pod: The paint is peeling off of the shower floors causing potential sanitation issues. These showers need to be painted and or covered with a surface that meets industry standards. (3) The facility daily sanitation & safety inspections are not being completed on a consistent basis. Additional Comments: Note: The facility has a contract with Cook's Pest Control			
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442 & 447 along with the outside window inside cell 443. (1) H-Pod: The TV cables need to be secured to the wall. (1) L-Pod: A Sink is missing a handle needs to be repaired along with a shower that is leaking. (1) N-Pod & O-Pod: The unit sinks do not have cold water valves to supply cold water to the inmates. Recommend adding water fountain to each unit to resolve issue. (1) B-Pod through L-Pod: The paint is peeling off of the shower floors causing potential sanitation issues. These showers need to be painted and or covered with a surface that meets industry standards. (3) The facility daily sanitation & safety inspections are not being completed on a consistent basis. Additional Comments: Note: All of the inmate housing area day rooms and cell areas were very clean at the time of inspection. Note: The facility has a contract with Cook's Pest Control to provide pest control service on a monthly basis. The last service was conducted on May 17, 2019. 1400-110 Food Services: Deficiencies Found: Yes X No (6) The daily meals served log is not being filled out on a consistent basis. 1(15) Additional Comments: Note: The facility has a contract with Trinity Food Services to conduct the food service operation. Note: The facility has a contract with Trinity Food Services to conduct the food service operation. Note: The menu pattern was approved by Jennifer Soners RD, LDN on January 15, 20197. 1400-111 Mail & Visiting: Deficiencies Found: Yes No Additional Comments: 1400-112 Inmate Programs & Activities: Deficiencies Found: Yes No Additional Comments: Additional Comments: Note: The medical Services: Deficiencies Found: Yes No Additional Comments: Note: The facility has a contract with QCHC (Quality Correctional Health Care) to provide all the inmate medical services. Note: The Medical Policy & Procedure, Medical Protocol, & first aid kit approval letter was approved & signed by Dr. Johnny Bates MD on November 13, 2018. All medical licenses are up to date and on file. Note: The facility u	(1) E Pad. The good look in cell-1/15 needs to be repaired & toilet needs to be	renaired. The glass needs to be	replaced in cell door
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Note: The annual meeting with the facility and health care provider was conducted on November 13, 2018. The facility also meets			
with QCHC on a monthly basis to review operational needs.	Note: The annual meeting with the facility and health care provider was cond	ucted on November 13, 2018. T	he facility also meets
	with QCHC on a monthly basis to review operational needs.		

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1400-114 Admi	ssion, Records and Release:	Deficiencies Found: Yes X No
		ed on the inmates as part of the intake process for classification use prior to
being placed in ge	eneral population. Most of the criminal	history checks are taking place two days after the inmate has been placed
into general popu		
		he booking process is not being documented on a consistent basis.
(7) The booking f	forms regarding facility issued property	are not being completed/filled out on a consistent basis.
Additional Comm	nents:	
		Der in Ly War
1400-115 Hygic		Deficiencies Found: Yes X No
	acility laundry logs concerning the sheed disinfected is not being documented on	ets, towels, blankets, uniforms/clothing being exchanged or laundered & a consistent basis.
Additional Comm		
1400-116 Super	vision of Inmates:	Deficiencies Found: Yes X No
(1)		
	pecial observation, & restraint chair che	ecks are not being conducted within the specified time parameters on a
consistent basis.	,	
Additional Comm	nents:	
1400-117 Class	ification:	Deficiencies Found: Yes No X
		, , , , , , , , , , , , , , , , , , ,
Additional Comm	nents:	
Note: The facility	classification process is very difficult	to achieve in the male and female inmate housing areas due to the
	owding on a daily basis.	
		ion Officer position to ensure all inmates are classified properly using the
criminal history in	nformation prior to the inmate being pla	aced into general population.
	W 10	5
	X Initial Annual Report	Re-inspection
Exit Interview:	Name:	Title:
	Steve Lawson	Sheriff
	Bill Dyer	Captain
	Gwen Beavers	Lieutenant
		Comments:
Recommend for	Re-Inspection on August 15, 2019. T	his is due to the deficiencies listed in the report. Most of the deficiencies
		overcrowding in male and female inmate housing areas along with a
		a consistent basis. The Sheriff, Captain, Lieutenant, & staff were very

professional during the Team Inspection process and are to be commended on the cleanness of the facility. Report submitted by; William R. Kane, DFM

Note: The Sheriff, Captain, & Lieutenant were advised during the exit interview that if the overcrowding and staffing levels could not be resolved by the Re-Inspection date an approved (POA) Plan of Action would be required to maintain Certification. This would require the Sheriff, County Mayor or designee to bring in a viable POA to the September 4, 2019 T.C.I. Board of Control meeting and submit it to the Board for approval.

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

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)

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