

**TEXAS COMMISSION ON JAIL STANDARDS
JAIL INSPECTION REPORT**

Facility Name: Hunt County Jail

Date:

April 18, 2018

Item	Section	Paragraph	Comments
1	259	.102	<p>Facility Security Requirements. Facility security shall be planned to protect inmates from one another, protect staff and visitors from inmates, and deter or prevent escapes.</p> <p>During the walk through, inspectors observed two large holes in the foundation of the jail. One hole was secured in a cell the other could not be secured in the inmate library. Also observed were numerous holes in the ceiling of the secured facility leading above ceiling grade. The holes in the facility were covered with plywood and non-detention grade screws.</p>
2	263	.55	<p>Inspections, Maintenance, Testing. All life safety equipment shall be inspected, maintained, and tested by persons qualified to do so (whether under vendor contract, by state or private agency or otherwise) in order that such equipment shall be safe, secure, and fully operative at all times.</p> <p>The fire system was tested under generator power. The fire panel, after being triggered from a smoke alarm, displayed a trouble code. Staff was unable to reset the system back to normal while under emergency power.</p>
3	265	.4(b)	<p>Inmate Files. Upon intake, a medical record shall be established and shall be kept separate.</p> <p>During a review of inmate files, it was discovered that two files contained medical records that were not separated. Those documents included the CCQ and Screening Form for Suicide and Medical and Mental Developmental Impairments.</p>
4	271	.1(b)(3)	<p>Custody Reassessment/Review. A custody reassessment shall be conducted within 30 - 90 days of the Initial Custody Assessment and immediately upon any disciplinary action and/or change in legal status which would affect classification. A documented classification review to determine the necessity for a complete reassessment shall be conducted every 30 - 90 days thereafter.</p> <p>During a review of classification files, it was discovered that Hunt County is not following their approved plan. According to their approved plan, inmates are to have their first initial reassessment within sixty (60) days of the initial assessment. The files reviewed were consistently over the sixty (60) days on the first reassessment.</p>
5	271	.1	<p>Objective Classification Plan. Each sheriff/operator shall develop and implement an objective classification plan approved by the Commission by January 1, 1997. The plan shall include principles, procedures, instruments and explanations for classification assessments, housing assignments, reassessments and inmate needs.</p> <p>Upon review of classification files, it was discovered that inmates are not being accurately reassessed utilizing the form in their approved plan. All inmates, with an assaultive felony and an initial assessment of 3 (medium custody), were never lowered in custody. This included inmates that displayed no institutional behavior problems.</p>
6	273	.5(a)(1)	<p>Mental Disabilities/Suicide Prevention Plan. Provisions for staff training (including frequency and duration) on the procedures for recognition, supervision, documentation, and handling of inmates who are mentally disabled and/or potentially suicidal.</p> <p>The jail staff are not receiving four (4) hours of suicide prevention in-service training annually in accordance with their approved operational plan.</p>

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- 7 273 .5(a)(5) Mental Disabilities/Suicide Prevention Plan. Provisions for adequate supervision of inmates who are mentally disabled and/or potentially suicidal and procedures for documenting supervision.
- It is noted on the suicide observation logs that observations shall be conducted within ten (10) minutes. The observations were documented to be over the ten (10) minute limit from six (6) to eight (8) minutes on a continuous basis.**
- 8 273 .6(5) Restraints. Documentation of use of restraints shall include, but not be limited to the following: the events leading up to the need for restraints, the time the restraints were applied, the justification for their use, observations of the inmate's behavior and condition, the 15-minute checks and the time the restraints were removed.
- During review of the restraint logs, officers are not documenting the time the restraints are removed.**
- 9 275 .4 Staff. Inmates shall be supervised by an adequate number of jailers to comply with state law and this chapter. One jailer shall be provided on each floor of the facility where 10 or more inmates are housed, with no less than 1 jailer per 48 inmates or increment thereof on each floor for direct inmate supervision.
- A review of staff rosters indicated that there were at least six (6) night shifts that were short staffed during the month of April in 2018. During the walk through, inspectors also observed the night shift to be short staffed the day of inspection. The current population was three hundred seventy-seven (377) inmates. This required eight (8) floor officers, but staff consisted of only six (6) floor officers.**
- 10 279 .1 Sanitation Plan. Each facility shall have and implement a written plan, reviewed and approved by the commission, for the maintenance of an acceptable level of cleanliness and sanitation throughout the facility.
- After interviewing staff and inmates, it was discovered that the facility is not following their approved operational plan. Inmates are receiving cleaning supplies every other day and not daily as outlined in their approved operation plan.**

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- 11 279 .3 Facility Maintenance. Preventive maintenance, to include necessary repairs, shall be conducted to ensure a safe, secure, and sanitary facility.
- During the walk-through of the facility, inspectors observed multiple maintenance issues. They are as follows: Numerous lavatories had low water pressure causing water to flow over the faucet head. Several privacy shields had loose bolts and were rusting preventing them from being secured in place. Several tables in the dayrooms and multipurpose rooms were found to be missing bolts causing them to not be properly secured. Inspector Phariss removed a dayroom table bolt from the floor shortly after entering cell 232 due to it not being properly secured. Other areas included holes in the concrete walls, television stands missing bolts, exposed electrical boxes, several lights throughout the facility being burned out, telephone with exposed wiring, furnishings are not secured with detention grade screws, and large unfilled cracks in the walls. All showers, except those few recently remodeled, have peeling paint and are covered in an unknown black substance. Privacy shields contained severe rust in on the panels and the mounting points on the floor. An unknown black substance covered walls throughout the cells. Officers are not maintaining a standard of cleanliness as outlined in their approved operation plan and minimum standards.**
- 12 283 .1 Inmate Discipline Plan. Each sheriff/operator shall develop and implement a written disciplinary plan, approved by the Commission, governing inmate conduct. The plan shall
- During a review of the disciplinary incidents, it was observed that staff is not following their approved operation plan. I/M Pickett was given a hearing with only one officer as the disciplinary board. Staff realized this was in violation. Staff then served I/M Pickett with another notice of disciplinary for the same charge and failed to wait twenty-four (24) afterward to hold a hearing. This violated due process in accordance with their approved operational plan.**
- 13 283 .2 Inmate Rules and Regulations. Every facility shall have prescribed rules and regulations governing inmate conduct. A copy of the institutional rules and regulations shall be made available to each inmate and read to illiterate inmates. A written acknowledgment by the inmate that the rules have been explained shall be retained. A translation shall be provided in an understandable language when necessary. The rules and regulations shall outline both Major and Minor Infractions, the types and ranges of possible sanctions for each category, due process requirements and specific procedures for filing a grievance. The rules and regulations, as provided to the inmate, shall be submitted to the Commission for approval.
- During review of the disciplinary incidents, it was discovered that staff are not following procedures in their approved inmate handbook. I/M Pickett was not offered a waiver as part of due process. The approved handbook states that an inmate may waive a hearing for any infraction, provided there is no threat of loss of good conduct credit or restitution. I/M Pickett's disciplinary infraction did not include a threat of a loss of good conduct credit or restitution.**

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14 283 .3 Inmate Grievance Plan. Every facility shall have and implement a written plan, approved by the Commission, for inmate grievance procedures.

During a review of grievances, inspectors were unable to verify any written responses from the Grievance Officer being provided to inmates in accordance with their approved operational plan.

15 287 .1 Education and Rehabilitation Plan. Each facility shall have and implement a written plan, approved by the Commission, for inmate rehabilitation and education.

While reviewing inmate files, a request form was located for I/M Rodriguez. I/M Rodriguez requested to participate in education and rehabilitation services of the facility. She was denied solely based off of her charge at the time, not whether she would pose a serious risk to inmate/officer safety or negatively impact jail security.


Jackie Benningfield, TCJS Inspector


William Phariss, TCJS Inspector