



Texas Commission on Jail Standards

Falls County Jail

Marlin, Texas

April 24, 2017

Date(s) of Inspection

SUBJECT: INSPECTION REPORT

State Law requires periodic inspections of county jail facilities (VTCA, Local Government Code, Chapter 351, VTCA, Government Code, Chapter 511; Chapter 297.8, Texas Commission on Jail Standards).

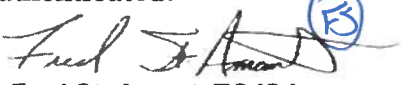
- The facility was inspected on the date(s) indicated above, and it was determined that deficiencies exist. You are urged: (1) to give these areas of noncompliance your serious and immediate consideration; and (2) to promptly initiate and complete appropriate corrective measures. The Commission is available to discuss or assist you with the appropriate corrective measures required.



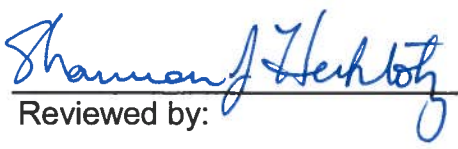
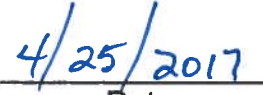
Failure to initiate and complete corrective measures following receipt of the Notice of Noncompliance may result in the issuance of a Remedial Order (Chapter 297.8, et seq.).

- This facility was inspected on the date(s) indicated above. There were no deficiencies noted and upon review of this report by the Executive Director of the Texas Commission on Jail Standards, a certificate of Compliance may be issued per the requirements of VTCA, Chapter 511 and Texas Minimum Jail Standards.

Authenticated:

Inter-Office Use Only

 F3
 Fred St. Amant, TCJS Inspector

| | |
|--|---|
|  Received by: |  Date |
|  Reviewed by: |  Date |

RECEIVED

APR 25 2017

Texas Commission on Jail Standards

cc: Judge
Sheriff

Individuals and/or entities regulated by the Texas Commission on Jail Standards shall direct all complaints regarding the commission procedures and functions to the Executive Director at: P.O. Box 12985 Austin, Texas 78711 (512) 463-5505 Fax (512) 463-3185 or at our agency website at www.tcjs.state.tx.us .

ANNUAL JAIL REPORT

| | | | |
|---------------------|--------------------------------------|------------|---|
| County: | <u>Falls</u> | | |
| Sheriff: | <u>Ricky Scaman</u> | Judge: | <u>Jay Elliott</u> |
| email | <u>ricky.scaman@co.falls.tx.us</u> | email | <u>jay.t.elliott@co.falls.tx.us</u> |
| Jail Administrator: | <u>Nanci Anderson</u> | Inspector: | <u>Fred St. Amant</u> FS |
| email | <u>nanci.anderson@co.falls.tx.us</u> | | |

Last Inspection May 16, 2016 Compliant No Inspection Date(s) April 24, 2017
 Remedial Order N/A Effect: _____

| | | | | |
|---|-------------------|------------------|-------------------|------------------|
| Reportable Incidents <small>(Previous 12 month History)</small> | Fires <u>0</u> | Escapes <u>0</u> | Walkaway <u>0</u> | Secured <u>0</u> |
| | Deaths <u>0</u> | | | |
| | Suicides <u>0</u> | | | |

Contract Inmates Housed

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |

Date Plans Approved February 9, 2011

1. Facility Name Falls County Jail
 Address 2847 Hwy. 6, Marlin, Texas Zip Code 76661
 Phone # 254-883-3566 Fax # 254-883-3700
 Built 2000 Renovated N/A Addition N/A
 Type Max Number of Variances 0

Drill Time 2m 45s
 Facility Capacity 107
 Average Daily Population 42
 Housing Total this Date 36
 Holding Total this Date 2

2. Facility Name _____
 Address _____ Zip Code _____
 Phone # _____ Fax# _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____

Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

3. Facility Name _____
 Address _____ Zip Code _____
 Phone # _____ Fax # _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____

Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|------------|------------------|-----------------|-----------------|-----------|------------------|------------|--|----------|-------------------------|----------|---------------------------------|----------|------------------------------|--|--------|--|--|--|--|-------------------------|-----------|--------------|-----------------|---------------|----------|----------------------|----------|---------------|----------|--|----------------|----------|---------------------------|--|------------|----------|------------|-----------|
| <table style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Housing Capacity</td><td style="text-align: right;"><u>107</u></td></tr> <tr><td style="text-align: center;">Cells</td><td style="text-align: center;">Capacity</td></tr> <tr><td>Sep Cells</td><td style="text-align: center;"><u>11</u></td></tr> <tr><td>Single Cells</td><td style="text-align: center;"><u>0</u></td></tr> <tr><td>M.O. Cells</td><td style="text-align: center;"><u>9</u></td></tr> <tr><td>Dorms</td><td style="text-align: center;"><u>2</u></td></tr> <tr><td>Neg Press Cells</td><td style="text-align: center;"><u>1</u></td></tr> <tr><td>Medical Cells</td><td style="text-align: center;"><u>0</u></td></tr> <tr><td>Notes:</td><td></td></tr> <tr><td colspan="2" style="font-size: small;">Negative pressure cell counts toward the separation count.</td></tr> </table> | Housing Capacity | <u>107</u> | Cells | Capacity | Sep Cells | <u>11</u> | Single Cells | <u>0</u> | M.O. Cells | <u>9</u> | Dorms | <u>2</u> | Neg Press Cells | <u>1</u> | Medical Cells | <u>0</u> | Notes: | | Negative pressure cell counts toward the separation count. | | <table style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Holding Capacity</td><td style="text-align: right;"><u>22</u></td></tr> <tr><td style="text-align: center;">Cells</td><td style="text-align: center;">Capacity</td></tr> <tr><td>Holding Cells</td><td style="text-align: center;"><u>2</u></td></tr> <tr><td>Detoxification Cells</td><td style="text-align: center;"><u>2</u></td></tr> <tr><td>Violent Cells</td><td style="text-align: center;"><u>1</u></td></tr> </table> | Holding Capacity | <u>22</u> | Cells | Capacity | Holding Cells | <u>2</u> | Detoxification Cells | <u>2</u> | Violent Cells | <u>1</u> | <table style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Females</td><td style="text-align: right;"><u>5</u></td></tr> <tr><td colspan="2" style="font-size: small;">(Female Population Today)</td></tr> <tr><td># of Cells</td><td style="text-align: center;"><u>4</u></td></tr> <tr><td># of Bunks</td><td style="text-align: center;"><u>48</u></td></tr> </table> | Females | <u>5</u> | (Female Population Today) | | # of Cells | <u>4</u> | # of Bunks | <u>48</u> |
| Housing Capacity | <u>107</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cells | Capacity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sep Cells | <u>11</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Single Cells | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M.O. Cells | <u>9</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dorms | <u>2</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Neg Press Cells | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medical Cells | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Notes: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Negative pressure cell counts toward the separation count. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Holding Capacity | <u>22</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cells | Capacity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Holding Cells | <u>2</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Detoxification Cells | <u>2</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Violent Cells | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Females | <u>5</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Female Population Today) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| # of Cells | <u>4</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| # of Bunks | <u>48</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2" style="text-align: center;">Construction Security Level</td></tr> <tr><td>Minimum Capacity</td><td style="text-align: center;"><u>0</u></td></tr> <tr><td>Medium Capacity</td><td style="text-align: center;"><u>0</u></td></tr> <tr><td>Maximum Capacity</td><td style="text-align: center;"><u>107</u></td></tr> </table> | Construction Security Level | | Minimum Capacity | <u>0</u> | Medium Capacity | <u>0</u> | Maximum Capacity | <u>107</u> | <table style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2" style="text-align: center;">Contract Inmates</td></tr> <tr><td colspan="2" style="text-align: center;">100 + Capacity (30% + Non - TX)</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/> Yes</td><td style="text-align: center;"><input checked="" type="checkbox"/> No</td></tr> </table> | | Contract Inmates | | 100 + Capacity (30% + Non - TX) | | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | |
| Construction Security Level | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Minimum Capacity | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medium Capacity | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Maximum Capacity | <u>107</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contract Inmates | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 100 + Capacity (30% + Non - TX) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Population: Housing 36 Hold/Detox/Violent 2 Total System Population 38
(During Inspection)
 Total Inspection Time 9 hours Total Average Daily Population 42.00

Sheriff Ricky Scaman
 Sheriff Ricky Scaman
 Jail Administrator
 Rev. 1/05/2011

RECEIVED

APR 25 2017

Interview with Court Representative Yes No

Briefed County Judge Elliott by phone.
 Commissioners Court Representative

TEXAS COMMISSION ON JAIL STANDARDS
JAIL INSPECTION REPORT

Facility Name: Falls County Jail

Date:

April 24, 2017

| Item | Section | Paragraph | Comments |
|------|---------|-----------|---|
| 1 | 263 | .41 | Training and Drills. Training of staff for emergency situations shall be provided immediately upon employment and no less than each calendar quarter for all jail personnel to include fire, emergency, evacuation drills, and location and use of equipment. |

During the review of the life safety paperwork, it was determined that none of the jailers received quarterly fire and life safety training as required by minimum jail standards. Furthermore, the jailers failed to respond to the first fire drill attempted during the walk-through of the annual inspection.



Fred St. Amant, TCJS Inspector

RECEIVED

APR 25 2017

Texas Commission on Jail Standards

TEXAS COMMISSION ON JAIL STANDARDS - INSPECTION REQUIREMENTS REVIEW

 (F3)
 Fred St. Amant, TCJS Inspector

Facility Name: Falls County Jail

Date:

April 24, 2017

| Chapter | Title | Comments |
|---------|-----------------------|---|
| 259 | New Construction | Conducted a walk through inspection of the facility. |
| 261 | Existing Construction | Not applicable. |
| 263 | Life Safety | Inspected life safety equipment and conducted and observed emergency drill. Reviewed documentation. Conducted staff interviews. Deficiency exists, please see the AONC report. Technical assistance provided. During the review of the life safety paperwork, this inspector observed that all jailers failed to receive quarterly training as required by minimum jail standards. Furthermore, the jailers did not respond to the first fire drill attempted during the walk-through. The administration will train all jailers regarding life safety. Issue is being addressed. This inspector will follow-up regarding this matter within the next 30 to 90 days. |
| 265 | Admission | Reviewed a random sample of 5 inmate files. Interviewed staff. Reviewed policy. |
| 267 | Release | Reviewed a random sample of 2 inmate files. Interviewed staff. |
| 269 | Records/Procedures | Reviewed policy and documentation. Interviewed staff and reviewed ADA compliance evaluation. |
| 271 | Classification | Reviewed a random selection of 5 inmate files. Reviewed staff training records. Reviewed internal classification audits. Reviewed policy. Interviewed staff. |
| 273 | Health Services | Reviewed a random selection of 5 files. Interviewed staff and inmates. Reviewed training records. Reviewed policy. |
| 275 | Supervision | Reviewed all 14 officer TCOLE certification records. Reviewed officer documentation. Interviewed staff. |
| 277 | Personal Hygiene | Conducted a facility walk through. Reviewed facility schedule. |
| 279 | Sanitation | Conducted a facility walk through. Interviewed staff and inmates. Reviewed policy. |
| 281 | Food Service | Conducted walk through inspection in kitchen area. Interviewed staff. Reviewed documentation. |
| 283.1 | Discipline | Reviewed 1 disciplinary hearing records. Interviewed staff and inmates. Reviewed policy. Reviewed inmate rules. |
| 283.3 | Grievance | Reviewed 0 inmate grievance/complaints. Reviewed policy. Interviewed staff and inmates. None on file. |
| 285 | Exercise | Walk through of exercise area conducted. Reviewed documentation. Interviewed staff and inmates. |
| 287 | Education/Library | Reviewed policy and schedule. Interviewed staff and inmates. |
| 289 | Work Assignments | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.1 | Telephone | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.2 | Correspondence | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.3 | Commissary | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.4 | Visitation | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.5 | Religious Practices | Reviewed policy and schedule. Interviewed staff and inmates. |
| xxx | Variances | Not applicable. |
| xxx | Remedial Orders | Not applicable. |
| xxx | Complaints | Not applicable. |
| xxx | CCQ | CCQ inquiries are being submitted through TLETS as required. |

RECEIVED

APR 25 2017

Texas Commission on Jail Standards



Texas Commission on Jail Standards

Falls County Jail

Marlin, Texas

May 16, 2016

Date(s) of Inspection

SUBJECT: INSPECTION REPORT

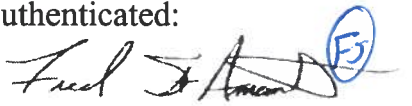
State Law requires periodic inspections of county jail facilities (VTCA, Local Government Code, Chapter 351, VTCA, Government Code, Chapter 511; Chapter 297.8, Texas Commission on Jail Standards).

The facility was inspected on the date(s) indicated above, and it was determined that deficiencies exist. You are urged: (1) to give these areas of noncompliance your serious and immediate consideration; and (2) to promptly initiate and complete appropriate corrective measures. The Commission is available to discuss or assist you with the appropriate corrective measures required.

Failure to initiate and complete corrective measures following receipt of the Notice of Noncompliance may result in the issuance of a Remedial Order (Chapter 297.8, et seq.).

This facility was inspected on the date(s) indicated above. There were no deficiencies noted and upon review of this report by the Executive Director of the Texas Commission on Jail Standards, a certificate of Compliance may be issued per the requirements of VTCA, Chapter 511 and Texas Minimum Jail Standards.

Authenticated:


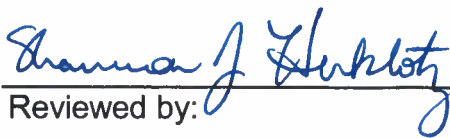

Fred St. Amant, TCJS Inspector

Inter-Office Use Only

RECEIVED

MAY 17 2016

Texas Commission on Jail Standards

| | |
|--|------------------|
|  | <u>5.17.16</u> |
| Received by: | Date |
|  | <u>5/17/2016</u> |
| Reviewed by: | Date |

cc: Judge
Sheriff

Individuals and/or entities regulated by the Texas Commission on Jail Standards shall direct all complaints regarding the commission procedures and functions to the Executive Director at: P.O. Box 12985 Austin, Texas 78711 (512) 463-5505 Fax (512) 463-3185 or at our agency website at www.tcjs.state.tx.us .

ANNUAL JAIL REPORT

| | | | |
|---------------------|-------------------------|------------|---|
| County: | <u>Falls</u> | | |
| Sheriff: | <u>Ben Kirk</u> | Judge: | <u>Jay Elliott</u> |
| email | <u>fcso1501@att.net</u> | email | <u>jay.t.elliott@co.falls.tx.us</u> |
| Jail Administrator: | <u>Bridget Burleson</u> | Inspector: | <u>Fred St. Aman</u> 5 |
| email | | | |

Last Inspection April 20, 2015 Compliant Yes Inspection Date(s) May 16, 2016
 Remedial Order N/A Effect: _____

| | | | |
|---|-------------------|-------------------|--|
| Reportable Incidents <small>(Previous 12 month History)</small> | Fires <u>0</u> | Escapes <u>0</u> | |
| | Deaths <u>0</u> | Walkaway <u>0</u> | |
| | Suicides <u>0</u> | Secured <u>0</u> | |

Contract Inmates Housed

| | |
|--|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Date Plans Approved February 9, 2011

1. Facility Name Falls County Jail
 Address 2847 Hwy. 6, Marlin, Texas Zip Code 76661
 Phone # 254-883-3566 Fax # 254-883-3700
 Built 2000 Renovated N/A Addition N/A
 Type Max Number of Variances 0

Drill Time 47 secs
 Facility Capacity 107
 Average Daily Population 40
 Housing Total this Date 42
 Holding Total this Date 0

2. Facility Name _____
 Address _____ Zip Code _____
 Phone # _____ Fax# _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____

Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

3. Facility Name _____
 Address _____ Zip Code _____
 Phone # _____ Fax # _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____

Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

| Housing Capacity <u>107</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Cells</th> <th style="width: 50%;">Capacity</th> </tr> <tr> <td>Sep Cells <u>11</u></td> <td><u>11</u></td> </tr> <tr> <td>Single Cells <u>0</u></td> <td><u>0</u></td> </tr> <tr> <td>M O. Cells <u>9</u></td> <td><u>56</u></td> </tr> <tr> <td>Dorms <u>2</u></td> <td><u>40</u></td> </tr> <tr> <td>Neg Press Cells <u>1</u></td> <td><u>1</u></td> </tr> <tr> <td>Medical Cells <u>0</u></td> <td><u>0</u></td> </tr> </table> <p><small>Notes: Negative pressure cell counts toward the separation count.</small></p> | Cells | Capacity | Sep Cells <u>11</u> | <u>11</u> | Single Cells <u>0</u> | <u>0</u> | M O. Cells <u>9</u> | <u>56</u> | Dorms <u>2</u> | <u>40</u> | Neg Press Cells <u>1</u> | <u>1</u> | Medical Cells <u>0</u> | <u>0</u> | Holding Capacity <u>22</u> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Cells</th> <th style="width: 50%;">Capacity</th> </tr> <tr> <td>Holding Cells <u>2</u></td> <td><u>11</u></td> </tr> <tr> <td>Detoxification Cells <u>2</u></td> <td><u>10</u></td> </tr> <tr> <td>Violent Cells <u>1</u></td> <td><u>1</u></td> </tr> </table> | Cells | Capacity | Holding Cells <u>2</u> | <u>11</u> | Detoxification Cells <u>2</u> | <u>10</u> | Violent Cells <u>1</u> | <u>1</u> | Females <u>10</u> <small>(Female Population Today)</small> # of Cells <u>4</u> # of Bunks <u>48</u> |
|--|-----------|---|---------------------|-----------|-----------------------|----------|---------------------|-----------|----------------|-----------|--------------------------|----------|------------------------|----------|---|-------|----------|------------------------|-----------|-------------------------------|-----------|------------------------|----------|---|
| Cells | Capacity | | | | | | | | | | | | | | | | | | | | | | | |
| Sep Cells <u>11</u> | <u>11</u> | | | | | | | | | | | | | | | | | | | | | | | |
| Single Cells <u>0</u> | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | |
| M O. Cells <u>9</u> | <u>56</u> | | | | | | | | | | | | | | | | | | | | | | | |
| Dorms <u>2</u> | <u>40</u> | | | | | | | | | | | | | | | | | | | | | | | |
| Neg Press Cells <u>1</u> | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | |
| Medical Cells <u>0</u> | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | |
| Cells | Capacity | | | | | | | | | | | | | | | | | | | | | | | |
| Holding Cells <u>2</u> | <u>11</u> | | | | | | | | | | | | | | | | | | | | | | | |
| Detoxification Cells <u>2</u> | <u>10</u> | | | | | | | | | | | | | | | | | | | | | | | |
| Violent Cells <u>1</u> | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | |
| Construction Security Level Minimum Capacity <u>0</u> Medium Capacity <u>0</u> Maximum Capacity <u>107</u> | | Contract Inmates 100 + Capacity (30% + Non - TX) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | |

Population: **Housing** 42 **Hold/Detox/Violent** 0 **Total System Population** 42
(During Inspection)

Total Inspection Time 8 hours **Total Average Daily Population** 40.00

Sheriff

 Jail Administrator

RECEIVED

Interview with Court Representative Yes No

MAY 17 2016

Briefed out with County Judge Elliott by phone.
 Commissioners Court Representative

TEXAS COMMISSION ON JAIL STANDARDS - INSPECTOR REQUIREMENTS REVIEW


 Fred St. Amant, TCJS Inspector

Facility Name: Falls County Jail

Date: May 16, 2016

| Chapter | Title | Comments |
|---------|-----------------------|--|
| 259 | New Construction | Conducted a walk through inspection of the facility. Technical assistance provided. 1) During the walk-through, this inspector reviewed the cell (Cell 155) where an inmate had attempted to escape. This inspector was able to identify that the concrete block that serves as the showers privacy partition did not extend to the ceiling of the cell due to a support beam being in the way. The lack of block provided the inmate the opportunity to dig out the concrete of the upper corner of the shower stall. The hole established was not large enough for the inmate to crawl through. Cell 155 is the only separation cell where this issue exists. The administration will speak with TCJS Planner Jason Ross to find a solution to cover the gap in order to prevent such an incident from happening again. The cell will remain closed until the repair is completed. 2) During the walk-through of the facility, this inspector found a hole in the violent cell existed where the padding was torn away exposing the bare floor underneath. The violent cell will not be utilized until the hole in the floor can be repaired. Issues are being addressed. This inspector will follow-up regarding these matters within 30 to 90 days. |
| 261 | Existing Construction | Not applicable. |
| 263 | Life Safety | Inspected life safety equipment and conducted and observed emergency drill. Reviewed documentation. Conducted staff interviews. |
| 265 | Admission | Reviewed a random sample of 5 inmate files. Interviewed staff. Reviewed policy. |
| 267 | Release | Reviewed a random sample of 3 inmate files. Interviewed staff. |
| 269 | Records/Procedures | Reviewed policy and documentation. Interviewed staff and reviewed ADA compliance evaluation. |
| 271 | Classification | Reviewed a random selection of 5 inmate files. Reviewed staff training records. Reviewed internal classification audits. Reviewed policy. Interviewed staff. |
| 273 | Health Services | Reviewed a random selection of 5 files. Interviewed staff and inmates. Reviewed training records. Reviewed policy. |
| 275 | Supervision | Reviewed all 9 officer TCOLE certification records. Reviewed officer documentation. Interviewed staff. Technical assistance provided. During the review of the jailer licenses, this inspector found that Jailer JoBeth Diles did not have an active jailer license. Ms. Diles previously worked at the jail but needs to attend jail school because of her break in service. She was rehired in March 2016. The administrator stated that she was informed by TCOLE that Ms. Diles would be given a temporary license in the meantime. Ms. Diles will not work in the jail until her license situation is resolved. The issue is being addressed. This inspector will follow-up regarding this matter within 30 to 90 days. |
| 277 | Personal Hygiene | Conducted a facility walk through. Reviewed facility schedule. |
| 279 | Sanitation | Conducted a facility walk through. Interviewed staff and inmates. Reviewed policy. |
| 281 | Food Service | Conducted walk through inspection in kitchen area. Interviewed staff. Reviewed documentation. |
| 283.1 | Discipline | Reviewed 10 disciplinary hearing records. Interviewed staff and inmates. Reviewed policy. Reviewed inmate rules. Technical assistance provided. During the review of the disciplinary hearing documentation, this inspector found that on occasion the jailer did not provide evidence relied upon when the inmate was found guilty of an infraction. This inspector reminded the administrator that the evidence relied upon statement is a requirement of minimum jail standards. The administrator will re-train all jailers regarding this issue. This issue is being addressed. This inspector will follow-up regarding this matter within 30 to 90 days. |
| 283.3 | Grievance | Reviewed 10 inmate grievance/complaints. Reviewed policy. Interviewed staff and inmates. |
| 285 | Exercise | Walk through of exercise area conducted. Reviewed documentation. Interviewed staff and inmates. |
| 287 | Education/Library | Reviewed policy and schedule. Interviewed staff and inmates. |

RECEIVED

MAY 17 2016

Texas Commission on Jail Standards

TEXAS COMMISSION ON JAIL STANDARDS - INSPECTOR REQUIREMENTS REVIEW

| | | |
|-------|---------------------|--|
| 289 | Work Assignments | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.1 | Telephone | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.2 | Correspondence | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.3 | Commissary | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.4 | Visitation | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.5 | Religious Practices | Reviewed policy and schedule. Interviewed staff and inmates. |
| xxx | Variances | Not applicable. |
| xxx | Remedial Orders | Not applicable. |
| xxx | Complaints | Not applicable. |
| xxx | CCQ | CCQ inquiries are being submitted through TLETS as required. |

RECEIVED

MAY 17 2016

Texas Commission on Jail Standards



Texas Commission on Jail Standards

Falls County Jail

Marlin, Texas

April 20, 2015

Date(s) of Inspection

SUBJECT: INSPECTION REPORT


State Law requires periodic inspections of county jail facilities (VTCA, Local Government Code, Chapter 351, VTCA, Government Code, Chapter 511; Chapter 297.8, Texas Commission on Jail Standards).

The facility was inspected on the date(s) indicated above, and it was determined that deficiencies exist. You are urged: (1) to give these areas of noncompliance your serious and immediate consideration; and (2) to promptly initiate and complete appropriate corrective measures. The Commission is available to discuss or assist you with the appropriate corrective measures required.

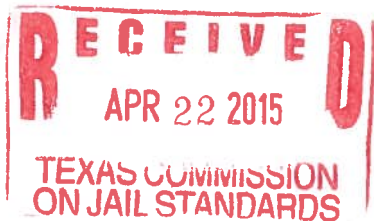
Failure to initiate and complete corrective measures following receipt of the Notice of Noncompliance may result in the issuance of a Remedial Order (Chapter 297.8, et seq.).

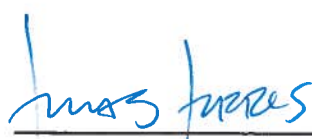
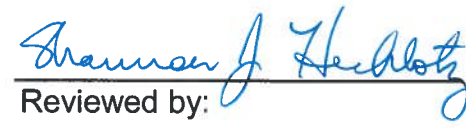
This facility was inspected on the date(s) indicated above. There were no deficiencies noted and upon review of this report by the Executive Director of the Texas Commission on Jail Standards, a certificate of Compliance may be issued per the requirements of VTCA, Chapter 511 and Texas Minimum Jail Standards.

Authenticated:


Fred St. Amant, TCJS Inspector

Inter-Office Use Only



| | |
|--|-----------|
|  | 4-22-15 |
| Received by: | Date |
|  | 4/22/2015 |
| Reviewed by: | Date |

cc: Judge
Sheriff

ANNUAL JAIL REPORT

| | | |
|---|---|--|
| County: <u>Falls</u> | | |
| Sheriff: <u>Ben Kirk</u> email: <u>fcso1501@att.net</u> | Judge: <u>Jay Elliott</u> email: <u>jay.t.elliott@co.falls.tx.us</u> | |
| Jail Administrator: <u>Bridget Burleson</u> email: _____ | Inspector: <u>Fred St. Amant</u> | |

Last Inspection May 2, 2014 Compliant Yes Inspection Date(s) April 20, 2015
 Remedial Order N/A Effect: _____

| | | |
|---|--------------------------|--------------------------|
| Reportable Incidents <small>(Previous 12 month History)</small> | Fires <u>0</u> | Escapes <u>0</u> |
| | Deaths <u>0</u> | Walkaway <u>0</u> |
| | Suicides <u>0</u> | Secured <u>0</u> |
| | | |

Contract Inmates Housed

| | |
|--|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Date Plans Approved February 9, 2011

1. Facility Name Falls County Jail

Address 2847 Hwy. 6, Marlin, Texas Zip Code 76661
 Phone # 254-883-3566 Fax # 254-883-3700
 Built 2000 Renovated N/A Addition N/A
 Type Max Number of Variances 0

Drill Time 44 secs
 Facility Capacity 107
 Average Daily Population 32
 Housing Total this Date 43
 Holding Total this Date 0

2. Facility Name _____

Address _____ Zip Code _____
 Phone # _____ Fax# _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____

Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

3. Facility Name _____

Address _____ Zip Code _____
 Phone # _____ Fax # _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____

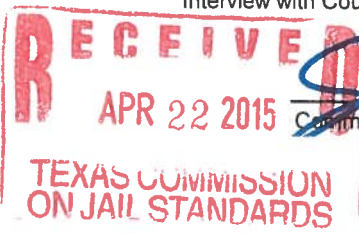
Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

| <p>Housing Capacity <u>107</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Cells</th> <th>Capacity</th> </tr> </thead> <tbody> <tr><td>Sep Cells <u>11</u></td><td><u>11</u></td></tr> <tr><td>Single Cells <u>0</u></td><td><u>0</u></td></tr> <tr><td>M O Cells <u>9</u></td><td><u>56</u></td></tr> <tr><td>Dorms <u>2</u></td><td><u>40</u></td></tr> <tr><td>Neg Press Cells <u>1</u></td><td><u>1</u></td></tr> <tr><td>Medical Cells <u>0</u></td><td><u>0</u></td></tr> </tbody> </table> <p>Notes: Negative pressure cell counts toward the separation count.</p> | Cells | Capacity | Sep Cells <u>11</u> | <u>11</u> | Single Cells <u>0</u> | <u>0</u> | M O Cells <u>9</u> | <u>56</u> | Dorms <u>2</u> | <u>40</u> | Neg Press Cells <u>1</u> | <u>1</u> | Medical Cells <u>0</u> | <u>0</u> | <p>Holding Capacity <u>22</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Cells</th> <th>Capacity</th> </tr> </thead> <tbody> <tr><td>Holding Cells <u>2</u></td><td><u>11</u></td></tr> <tr><td>Detoxification Cells <u>2</u></td><td><u>10</u></td></tr> <tr><td>Violent Cells <u>1</u></td><td><u>1</u></td></tr> </tbody> </table> <p>Construction Security Level</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Minimum Capacity</td><td><u>0</u></td></tr> <tr><td>Medium Capacity</td><td><u>0</u></td></tr> <tr><td>Maximum Capacity</td><td><u>107</u></td></tr> </table> | Cells | Capacity | Holding Cells <u>2</u> | <u>11</u> | Detoxification Cells <u>2</u> | <u>10</u> | Violent Cells <u>1</u> | <u>1</u> | Minimum Capacity | <u>0</u> | Medium Capacity | <u>0</u> | Maximum Capacity | <u>107</u> | <p>Females <u>9</u> <small>(Female Population Today)</small></p> <p># of Cells <u>4</u> # of Bunks <u>48</u></p> <p>Contract Inmates 100 + Capacity (30% + Non - TX) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |
|---|------------|----------|---------------------|-----------|-----------------------|----------|--------------------|-----------|----------------|-----------|--------------------------|----------|------------------------|----------|--|-------|----------|------------------------|-----------|-------------------------------|-----------|------------------------|----------|------------------|----------|-----------------|----------|------------------|------------|--|
| Cells | Capacity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sep Cells <u>11</u> | <u>11</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Single Cells <u>0</u> | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M O Cells <u>9</u> | <u>56</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dorms <u>2</u> | <u>40</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Neg Press Cells <u>1</u> | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medical Cells <u>0</u> | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cells | Capacity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Holding Cells <u>2</u> | <u>11</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Detoxification Cells <u>2</u> | <u>10</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Violent Cells <u>1</u> | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Minimum Capacity | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medium Capacity | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Maximum Capacity | <u>107</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Population: **Housing** 43 **Hold/Detox/Violent** 0 **Total System Population** 43
(During Inspection)
 Total Inspection Time 8 hours **Total Average Daily Population** 32.00

Sheriff

 Jail Administrator
 Rev. 1/05/2011



Interview with Court Representative Yes No

 Commissioner's Court Representative

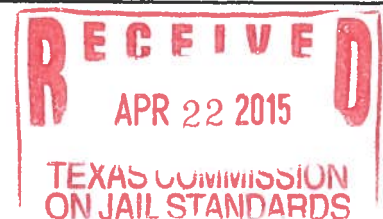
TEXAS COMMISSION ON JAIL STANDARDS - INSPECTION REQUIREMENTS REVIEW


 Fred St. Amant, TCJS Inspector

Facility Name: Falls County Jail

Date: April 20, 2015

| Chapter | Title | Comments |
|---------|-----------------------|--|
| 259 | New Construction | Conducted a walk through inspection of the facility. |
| 261 | Existing Construction | Not applicable. |
| 263 | Life Safety | Inspected life safety equipment and conducted and observed emergency drill. Reviewed documentation. Conducted staff interviews. Technical assistance provided. During the walk-through of the jail, this inspector observed that the smoke fans in zones 1,3,4, and 7 did not work as designed. The smoke fan controls showed the zones in purge failure. The administration contacted the vendor responsible for repair to assess the issue. The vendor was able to reset the system prior to the end of the inspection. This inspector tested the system after the repair and it worked as designed. Issue was corrected on-site. No follow-up is necessary. |
| 265 | Admission | Reviewed a random sample of 5 inmate files. Interviewed staff. Reviewed policy. |
| 267 | Release | Reviewed a random sample of 3 inmate files. Interviewed staff. |
| 269 | Records/Procedures | Reviewed policy and documentation. Interviewed staff and reviewed ADA compliance evaluation. |
| 271 | Classification | Reviewed a random selection of 5 inmate files. Reviewed staff training records. Reviewed internal classification audits. Reviewed policy. Interviewed staff. |
| 273 | Health Services | Reviewed a random selection of 5 files. Interviewed staff and inmates. Reviewed training records. Reviewed policy. |
| 275 | Supervision | Reviewed all 8 officer TCOLE certification records. Reviewed officer documentation. Interviewed staff. |
| 277 | Personal Hygiene | Conducted a facility walk through. Reviewed facility schedule. |
| 279 | Sanitation | Conducted a facility walk through. Interviewed staff and inmates. Reviewed policy. |
| 281 | Food Service | Conducted walk through inspection in kitchen area. Interviewed staff. Reviewed documentation. |
| 283.1 | Discipline | Reviewed 12 disciplinary hearing records. Interviewed staff and inmates. Reviewed policy. Reviewed inmate rules. |
| 283.3 | Grievance | Reviewed 11 inmate grievance/complaints. Reviewed policy. Interviewed staff and inmates. |
| 285 | Exercise | Walk through of exercise area conducted. Reviewed documentation. Interviewed staff and inmates. Technical assistance provided. During the review of the recreation documentation, this inspector observed that on occasion the jailers did not document as to the reason why the inmate did not received his or her full hour of recreation. This inspector informed the administration that anytime the inmate does not receive the full hour of recreation, a reason as to why must be documented. Issue was corrected on-site. This inspector will follow-up regarding this issue within 30 to 90 days. |
| 287 | Education/Library | Reviewed policy and schedule. Interviewed staff and inmates. |
| 289 | Work Assignments | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.1 | Telephone | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.2 | Correspondence | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.3 | Commissary | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.4 | Visitation | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.5 | Religious Practices | Reviewed policy and schedule. Interviewed staff and inmates. |
| xxx | Variances | Not applicable. |
| xxx | Remedial Orders | Not applicable. |
| xxx | Complaints | Not applicable. |
| xxx | CCQ | CCQ inquiries are being submitted through TLETS as required. |





Texas Commission on Jail Standards

Falls County Jail

May 2, 2014

Marlin, Texas

Date(s) of Inspection

SUBJECT: INSPECTION REPORT


State Law requires periodic inspections of county jail facilities (VTCA, Local Government Code, Chapter 351, VTCA, Government Code, Chapter 511; Chapter 297.8, Texas Commission on Jail Standards).

The facility was inspected on the date(s) indicated above, and it was determined that deficiencies exist. You are urged: (1) to give these areas of noncompliance your serious and immediate consideration; and (2) to promptly initiate and complete appropriate corrective measures. The Commission is available to discuss or assist you with the appropriate corrective measures required.

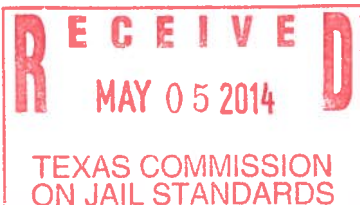
Failure to initiate and complete corrective measures following receipt of the Notice of Noncompliance may result in the issuance of a Remedial Order (Chapter 297.8, et seq.).


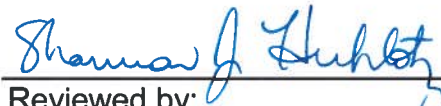
This facility was inspected on the date(s) indicated above. There were no deficiencies noted and upon review of this report by the Executive Director of the Texas Commission on Jail Standards, a certificate of Compliance may be issued per the requirements of VTCA, Chapter 511 and Texas Minimum Jail Standards.

Authenticated:


Fred St. Amant, TCJS Inspector

Inter-Office Use Only



| | |
|--|-----------------|
|  | <u>5/5/2014</u> |
| Received by: | Date |
|  | <u>5/9/2014</u> |
| Reviewed by: | Date |

cc: Judge
Sheriff

Individuals and/or entities regulated by the Texas Commission on Jail Standards shall direct all complaints regarding the commission procedures and functions to the Executive Director at: P.O. Box 12985 Austin, Texas 78711 (512) 463-5505 Fax (512) 463-3185 or at our agency website at www.tcjs.state.tx.us .

**TEXAS COMMISSION ON JAIL STANDARD
ANNUAL JAIL REPORT**

| | | | |
|---------------------|--------------------------|------------|--------------------------------|
| County: | <u>Falls</u> | | |
| Sheriff: | <u>Ben Kirk</u> | Judge: | <u>Robert Steven Sharp</u> |
| email | <u>fcso1501@att.net</u> | email | <u>rs.sharp@co.falls.tx.us</u> |
| Jail Administrator: | <u>Bridgett Burleson</u> | Inspector: | <u>Fred St. Amant</u> |
| email | | | |

Last Inspection March 18, 2013 Compliant Yes Inspection Date(s) May 2, 2014
 Remedial Order N/A Effect: _____

Reportable Incidents (Previous 12 month History)

| | | | |
|-----------------|----------|-----------------|----------|
| Fires | <u>0</u> | Escapes | <u>0</u> |
| Deaths | <u>0</u> | Walkaway | <u>0</u> |
| Suicides | <u>0</u> | Secured | <u>0</u> |

Contract Inmates Housed

| |
|-------|
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |

Date Plans Approved February 9, 2011

1. Facility Name Falls County Detention Center
 Address 2847 Hwy 6, Marlin, Texas Zip Code 76661
 Phone # 254-883-3566 Fax # (254) 883-3700
 Built 2000 Renovated N/A Addition N/A
 Type Max Number of Variances 0

Drill Time 1m 37s
 Facility Capacity 107
 Average Daily Population 34
 Housing Total this Date 32
 Holding Total this Date 0

2. Facility Name _____
 Address _____ Zip Code _____
 Phone # _____ Fax # _____
 Built _____ Addition _____
 Type Remote Court Holding Number of Variances _____

Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

3. Facility Name _____
 Address _____ Zip Code _____
 Phone # _____ Fax # _____
 Built _____ Renovated _____ Addition _____
 Type _____ Number of Variances _____

Drill Time _____
 Facility Capacity _____
 Average Daily Population _____
 Housing Total this Date _____
 Holding Total this Date _____

| <p>Housing Capacity <u>107</u></p> <table style="width:100%;"> <tr> <th>Cells</th> <th>Capacity</th> </tr> <tr><td>Sep Cells</td><td style="text-align:center;"><u>11</u></td></tr> <tr><td>Single Cells</td><td style="text-align:center;"><u>0</u></td></tr> <tr><td>M.O. Cells</td><td style="text-align:center;"><u>9</u></td></tr> <tr><td>Dorms</td><td style="text-align:center;"><u>2</u></td></tr> <tr><td>Neg Press Cells</td><td style="text-align:center;"><u>1</u></td></tr> <tr><td>Medical Cells</td><td style="text-align:center;"><u>1</u></td></tr> </table> <p>Notes: Negative pressure cell counts toward the separation count.</p> | Cells | Capacity | Sep Cells | <u>11</u> | Single Cells | <u>0</u> | M.O. Cells | <u>9</u> | Dorms | <u>2</u> | Neg Press Cells | <u>1</u> | Medical Cells | <u>1</u> | <p>Holding Capacity <u>22</u></p> <table style="width:100%;"> <tr> <th>Cells</th> <th>Capacity</th> </tr> <tr><td>Holding Cells</td><td style="text-align:center;"><u>2</u></td></tr> <tr><td>Detoxification Cells</td><td style="text-align:center;"><u>2</u></td></tr> <tr><td>Violent Cells</td><td style="text-align:center;"><u>1</u></td></tr> </table> <p>Construction Security Level</p> <table style="width:100%;"> <tr><td>Minimum Capacity</td><td>_____</td></tr> <tr><td>Medium Capacity</td><td>_____</td></tr> <tr><td>Maximum Capacity</td><td style="text-align:center;"><u>107</u></td></tr> </table> | Cells | Capacity | Holding Cells | <u>2</u> | Detoxification Cells | <u>2</u> | Violent Cells | <u>1</u> | Minimum Capacity | _____ | Medium Capacity | _____ | Maximum Capacity | <u>107</u> | <p>Females <u>4</u> (Female Population Today)</p> <p># of Cells <u>4</u> # of Bunks <u>48</u></p> <p>Contract Inmates 100 + Capacity (30% + Non - TX) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |
|--|------------|----------|-----------|-----------|--------------|----------|------------|----------|-------|----------|-----------------|----------|---------------|----------|---|-------|----------|---------------|----------|----------------------|----------|---------------|----------|------------------|-------|-----------------|-------|------------------|------------|---|
| Cells | Capacity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sep Cells | <u>11</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Single Cells | <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M.O. Cells | <u>9</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dorms | <u>2</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Neg Press Cells | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medical Cells | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cells | Capacity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Holding Cells | <u>2</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Detoxification Cells | <u>2</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Violent Cells | <u>1</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Minimum Capacity | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medium Capacity | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Maximum Capacity | <u>107</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Population: **Housing** 36 **Hold/Detox/Violent** 0 **Total System Population** 36
(During Inspection)
 Total Inspection Time 8 hours **Total Average Daily Population** 34.00

Sheriff

 Jail Administrator



Interview with Court Representative Yes No

 Commissioners Court Representative

TEXAS COMMISSION ON JAIL STANDARDS - INSPECTION REQUIREMENTS REVIEW



Fred St. Amant, TCJS Inspector

Facility Name: Falls County Jail

Date:

May 2, 2014

| Chapter | Title | Comments |
|---------|-----------------------|--|
| 259 | New Construction | Conducted a walk through inspection of the facility. |
| 261 | Existing Construction | Not applicable. |
| 263 | Life Safety | Inspected life safety equipment and conducted and observed emergency drill. Reviewed documentation. Conducted staff interviews. Technical assistance provided. The fire marshal has not inspected the facility within the past year. The fire marshal last inspected the facility on March 18, 2013. The administration contacted the fire marshal and he is scheduled to inspect the facility on May 3, 2014 at 8am. The administration will then forward the report to this Inspector. The administration is aware that if the report is not received by TCJS by the end of business on May 5, 2014, the facility could be found to be in non-compliance. Issue is being addressed. This inspector will follow-up regarding this matter on May 5, 2014. **Note: The fire marshal did inspect the facility on May 4, 2014 and the facility is now in full compliance with minimum jail standards. |
| 265 | Admission | Reviewed a random sample of 4 inmate files. Interviewed staff. Reviewed policy. |
| 267 | Release | Reviewed a random sample of 4 inmate files. Interviewed staff. |
| 269 | Records/Procedures | Reviewed policy and documentation. Interviewed staff and reviewed ADA compliance evaluation. |
| 271 | Classification | Reviewed a random selection of 4 inmate files. Reviewed staff training records. Reviewed internal classification audits. Reviewed policy. Interviewed staff. |
| 273 | Health Services | Reviewed a random selection of 4 files. Interviewed staff and inmates. Reviewed training records. Reviewed policy. |
| 275 | Supervision | Reviewed all 9 officer TCOLE certification records. Reviewed officer documentation. Interviewed staff. |
| 277 | Personal Hygiene | Conducted a facility walk through. Reviewed facility schedule. |
| 279 | Sanitation | Conducted a facility walk through. Interviewed staff and inmates. Reviewed policy. |
| 281 | Food Service | Conducted walk through inspection in kitchen area. Interviewed staff. Reviewed documentation. |
| 283.1 | Discipline | Reviewed 9 disciplinary hearing records. Interviewed staff and inmates. Reviewed policy. Reviewed inmate rules. Technical assistance provided. 1) When reviewing the inmate disciplinary paperwork, this inspector observed that the facility did NOT wait 24 hours after serving the inmate his notice of disciplinary. The facility administration was using the date the incident occurred as the time to when the 24 hour notice would begin rather than the date the inmate signed for receipt of the notice of disciplinary. The administration is now clear that the 24 hour period starts at the time the inmate signs for the notice of disciplinary. Issue was corrected on-site. The Inspector will follow-up regarding this matter within 90 days. 2) When reviewing the paperwork, the inspector observed that the facility was not conducting a disciplinary board as required by minimum jail standards. The administration believed that a board had to be conducted when a facility held 50 inmates or more. The average daily population for the facility is 34. This inspector advised the administration that the standard states that a board does not have to held where a facility is 50 <u>beds</u> or less not "inmates". The facility capacity is 107. The administration will hold a board when it is necessary for their disciplinary process in accordance with standards from this point forward. Issue was corrected on-site. This inspector will follow-up regarding this issue within 90 days. |
| 283.3 | Grievance | Reviewed 7 inmate grievance/complaints. Reviewed policy. Interviewed staff and inmates. |
| 285 | Exercise | Walk through of exercise area conducted. Reviewed documentation. Interviewed staff and inmates. |
| 287 | Education/Library | Reviewed policy and schedule. Interviewed staff and inmates. |
| 289 | Work Assignments | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.1 | Telephone | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.2 | Correspondence | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.3 | Commissary | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.4 | Visitation | Reviewed policy and schedule. Interviewed staff and inmates. |
| 291.5 | Religious Practices | Reviewed policy and schedule. Interviewed staff and inmates. |
| xxx | Variances | Not applicable. |
| xxx | Remedial Orders | Not applicable. |
| xxx | Complaints | Not applicable. |
| xxx | CCQ | CCQ standards are being met by the facility as required by TLETS. |

R E C E I V E D
MAY 05 2014
TEXAS COMMISSION
ON JAIL STANDARDS

Texas Commission on Jail Standards

Facility Overview Sheet

| | | | | | |
|---------------------|-----------------------------------|------------------------|--------|------------------------|------------|
| County | FALLS | Facility | 1 of 1 | Date | 04/27/2015 |
| FacilityName | Falls County Law Detention Center | Total Sys Bunks | 107 | Inspector | St. Amant |
| Address | 2847 State Hwy 6;PO Box 401 | Facility Type | Max | Certified | Y |
| City | Marlin | | | Inspection Date | 04/20/2015 |
| | TX 76661-0401 | | | | |

| | Number | Capacity | | | Male | Female |
|--------------------------|--------|----------|----------------------------------|-----|-------------------------|-----------------|
| Separation Cells | 11 | 11 | Facility Capacity | 107 | Minimum | 0 0 |
| Single Cells | 0 | 0 | Facility Design Capacity | 107 | Medium | 0 0 |
| M.O. Cells | 9 | 56 | Total No. Varianced Bunks | 0 | Maximum | 59 48 |
| Dormitories | 2 | 40 | | | | |
| Negative Pressure | 1 | 1 | | | | |
| Total Med Cells | 0 | 0 | | | | |
| | | | | | Number | Capacity |
| | | | | | Holding | 2 11 |
| | | | | | Detox | 2 10 |
| | | | | | Violent Cells | 1 1 |
| | | | | | Remote Hold Cell | 0 0 |

Design Firm BSA

| | | | |
|-------------------|---------|--------------------------------------|---------|
| Existing | | Existing Construction Rules | |
| New | 7/27/00 | New Construction Rules | 259.100 |
| Addition | | Addition Construction Rules | |
| Renovation | | Renovation Construction Rules | |

| | | | | |
|--|-------------|------------------|---------------|-------------|
| | Date | Inspector | Rule # | Type |
|--|-------------|------------------|---------------|-------------|

Occupancy Inspection

Comments: One of the Separation Cells is equipped with Negative Pressure.