

The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

Bureau of Environmental Health

Community Sanitation Program

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July 8, 2020

Steven Souza, Superintendent

Bristol County Jail and House of Correction

400 Faunce Corner Road

North Dartmouth, MA 02747

Re: Complaint Investigation – Bristol County Jail and House of Correction, North Dartmouth

 (electronic copy)

Dear Superintendent Souza:

The Massachusetts Department of Public Health (DPH) has received numerous complaints regarding unsanitary conditions at the Bristol County Jail and House of Correction in North Dartmouth. The complaints cover a wide array of issues and many of the allegations are governed by DPH regulations. These regulations include 105 CMR 451.000: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facilities; 105 CMR 590.000: Minimum Sanitation Standards for Food Establishments (State Sanitary Code Chapter X); and the 2013 Food Code. In addition to complaints related to unsanitary conditions, several complaints allege the implementation of improper policies and procedures for limiting the spread of COVID-19.

On June 19, 2020, DPH provided a copy of complaints received and requested a formal response, including an outline of measures taken to ensure that sanitary conditions are met and that you provide the Bristol County House of Corrections internal COVID-19 infection control plan for review. DPH received this response on June 25, 2020 and reviewed its contents.

**Scope of Complaint Investigation Site Visit**

Additionally, DPH conducted an onsite investigation on Thursday, June 25, 2020 of the conditions within the I.C.E. Facility; Unit 1 West within the Modular Building; Units EE, EA, FA, HA, GC; the Laundry area; and the Kitchen within the House of Correction. Four staff members from the DPH Community Sanitation Program (Steven Hughes, Nicholas Gale, Kerry Wagner, and Scott Koczela) investigated the allegations of unsanitary conditions that included:

* Lack of access to drinking water;
* Unclean cells and bathrooms;
* Lack of clean clothing;
* Spoiled food;
* No access to soap, towels, toothbrushes, toothpaste; and
* Denial of access to medical care and prescribed medications.

Two public health Registered Nurses from the DPH Bureau of Infectious Disease and Laboratory Sciences (Glynnis LaRosa and Catherine Reilly) toured the facility’s Health Unit/Infirmary and the Intake Area for inmates. The DPH nurses met with the nursing supervisor, several nurses, one physician, and corrections officers in both the Health Unit and Intake Area. They assessed the facility’s compliance with the CDC’s Guidance on Management of Coronavirus Disease (COVID-19) in Correctional and Detention facilities and the infection control processes associated with the following:

* Screening practices for staff, inmates, and outside personnel;
* Enhanced cleaning and disinfecting of equipment, facility areas, and all high-touch areas;
* Hygiene practices including hand hygiene/hand washing;
* Training, distribution, and availability of personal protective equipment (PPE);
* Social distancing requirements between staff and the population as well as between inmates;
* Visitation controls;
* Testing for inmates and facility staff;
* Isolation of positive confirmed cases and suspected cases;
* Quarantine of transferred inmates and close contacts of confirmed or suspect cases;
* Communication and reporting of confirmed and suspected cases of inmates and staff to the local health department or MDPH; and
* Transportation plans for inmates that require medical care beyond what the facility can provide to a local hospital.

**Findings of the Complaint Investigation and Follow-Up Requested**

Detailed results of the complaint investigation related to unsanitary conditions are noted in Attachment 1, the Health & Safety Violations Section. Detailed results of the evaluation related to COVID-19 are reported in Attachment 2.

* At the time of investigation, as well as during the exit interview with the Superintendent, it was confirmed that all inmates have access to **clean drinking water** in both the cell areas and common areas. The institution previously provided water in a cooler during outdoor recreation periods along with paper cups; however, this was discontinued during the pandemic due to the danger of cross-contamination. No other restrictions have been instituted.
* Reporting on findings related to **cell conditions** in those cells inspected and **bathroom cleanliness** are noted in the Health & Safety Violations Section by the particular unit inspected.
* Reporting on findings including specific health and safety violations in the **food service/kitchen area** are noted in the Health & Safety Violations Section. Examples include a small refrigerator not holding food at the proper temperature and a cooler being used to store food to be discarded that should be labeled as such. Some corrections were made at the time of the visit (such as discarding food from the small refrigerator).
* At the time of investigation, DPH confirmed that hygiene products such as soap, towels, toothbrushes, and toothpaste are available for inmates.
* At the time of investigation, as well as during the exit interview with the Superintendent, it was confirmed that access to **medical care and prescribed medication**, as well as routine health care, have remained available to inmates without disruption.
* DPH inspected the Laundry unit and found all equipment to be fully operational. It was also confirmed that there has not been any disruption to the laundry schedule or access restrictions to laundry service or **clean clothes**.
* The facility’s infection control manual appears to be out-of-date (it is not dated) and does not include COVID-specific information.
* More inmate education is needed on COVID-19. This includes posting more educational materials in more languages and holding group training (instead of solely relying on 1-on-1 education).
* Health care staff should be fit tested for N95 respirators/masks.
* To ensure adequate social distancing, the number of inmates and staff in the health unit/infirmary needs to be more closely controlled.

**DPH requests that a corrective action plan to address all sanitary and food code violations identified during the facility inspection and detailed in Attachment 1 be submitted to the Community Sanitation Program by July 24, 2020. In addition, your response should address the recommendations made in Attachment 2 related to infection control and COVID-19 response.**

Sincerely,



Nicholas Gale

Environmental Health Inspector, Community Sanitation Program

Bureau of Environmental Health

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**ATTACHMENT 1**

**HEALTH AND SAFETY VIOLATIONS**

**BRISTOL COUNTY JAIL AND HOUSE OF CORRECTION**

**Note:**

1. At the time of investigation, the inmate population within the area of the facility investigated was 496.
2. Unit B in the I.C.E Facility was unoccupied and currently undergoing renovations.

**Laundry**

 No Violations Noted

**Units**

**EE Unit**

*Main Area*

 No Violations Noted

*Showers – 2nd Floor*

105 CMR 451.123 Maintenance: Soap scum on walls in shower # 1 and 2

*Showers – 1st Floor*

 No Violations Noted

*Cells*

105 CMR 451.353 Interior Maintenance: Walls are not of light color, black

105 CMR 451.117 Toilet Fixtures: Toilet fixture dirty in cell # G3

105 CMR 451.117 Toilet Fixtures: Toilet fixture had objectionable odor in cell # G3

105 CMR 451.130 Plumbing: Plumbing not maintained in good repair, sink clogged in cell # G5

105 CMR 451.130 Plumbing: Plumbing not maintained in good repair, toilet clogged in cell # G5

**EA Unit – Female**

*Main Area*

 No Violations Noted

*Shower – 1st Floor*

105 CMR 451.130 Hot Water: Shower water temperature recorded at 1150F

*Shower – 2nd Floor*

 No Violations Noted

*Cells*

105 CMR 451.321 Cell Size: Inadequate floor space in cells, cells double bunked

**FA Unit**

*Main Area*

 No Violations Noted

*Showers – 2nd Floor*

105 CMR 451.123 Maintenance: Floor surface damaged outside shower # FM-A18

105 CMR 451.123 Maintenance: Soap scum on walls in shower # FM-A19

105 CMR 451.123 Maintenance: Door louvre damaged in shower # FM-A19

105 CMR 451.123 Maintenance: Door frame paint damaged in shower # FM-A19

*Handicapped Shower*

 No Violations Noted

*Showers – 1st Floor*

105 CMR 451.123 Maintenance: Floor damaged outside shower # FG-A18 and FG-A21

*Cells*

105 CMR 451.321 Cell Size: Inadequate floor space in all cells, cells double bunked

105 CMR 451.353 Interior Maintenance: Floor surface damaged in all cells

**Courtyard Units**

**HA Unit**

*Main Area*

105 CMR 451.141 Screens: Screen missing from window near entrance

*Showers – 2nd Floor*

105 CMR 451.123 Maintenance: Door rusted in shower # HM-A26

105 CMR 451.123 Maintenance: Door rusted in shower # HM-A23

105 CMR 451.123 Maintenance: Floor dirty in shower # HM-A23 and HM-A27

105 CMR 451.123 Maintenance: Soap scum on walls in shower # HM-A23, HM-A26, and HM-A27

*Handicapped Shower*

 No Violations Noted

*Showers – 1st Floor*

105 CMR 451.123 Maintenance: Floor dirty in shower # HG-A26

105 CMR 451.123 Maintenance: Floor epoxy cracking in shower # HG-A22

105 CMR 451.123 Maintenance: Door paint damaged in shower # HG-A22 and HG-A23

*Cells*

105 CMR 451.321 Cell Size: Inadequate floor space in all cells, cells double bunked

105 CMR 451.353 Interior Maintenance: Wall vent blocked in cell # G10

**GC Unit – Former Gym**

*Main Area*

105 CMR 451.353 Interior Maintenance: Floor damaged in several areas

*Bathroom*

105 CMR 451.130 Plumbing: Plumbing not maintained in good repair, toilet # 8 out-of-order

105 CMR 451.130 Plumbing: Plumbing not maintained in good repair, 1 sink out-of-order

*Showers*

 No Violations Noted

*Janitor’s Closet*

 No Violations Noted

*Sleeping Area*

105 CMR 451.322 Cell Size: Inadequate floor space in dorm sleeping area

**MODULAR BUILDING**

**1 West**

*Main Area*

 No Violations Noted

*Janitor’s Closet*

 No Violations Noted

*Bathroom 1 (right side)*

105 CMR 451.123 Maintenance: Shower partition paint damaged in shower # 4 and 5

105 CMR 451.123 Maintenance: Toilet partition paint damaged between toilet # 2 and 3

105 CMR 451.123 Maintenance: Wall paint damaged in shower # 1 and 2

105 CMR 451.130 Hot Water: Shower water temperature recorded at 1160F in shower # 5

*Bathroom 2 (left side)*

105 CMR 451.123 Maintenance: Floor dirty throughout bathroom

105 CMR 451.130 Plumbing: Plumbing not maintained in good repair, hot water out-of-order at sink # 12

*Dorms*

105 CMR 451.322 Cell Size: Inadequate floor space in all dorms

**I.C.E FACILITY**

**Exterior**

105 CMR 451.370 Garbage Storage: Garbage stored in an unsanitary condition, covers damaged and no longer tight-fitting

**Common Area**

*Garage Bathroom*

 No Violations Noted

*Lobby*

 No Violations Noted

**Units**

**Unit A**

*Nurse’s Office*

105 CMR 451.353 Interior Maintenance: Padding damaged and no longer easily cleanable on blue chair

*Nurse’s Bathroom*

 No Violations Noted

*Inmate Bathroom Area*

 No Violations Noted

*Shower Area*

105 CMR 451.123 Maintenance: Wall tile grout dirty in shower # 1-6

105 CMR 451.123 Maintenance: Floor tile damaged in shower # 4

105 CMR 451.123 Maintenance: Ceiling tile water stained near showers

*Laundry*

 No Violations Noted

*Sleeping Area*

105 CMR 451.322 Cell Size: Inadequate floor space in dorm sleeping area

**B Unit (Under Renovation)**

*Nurse’s Office*

 No Violations Noted

*Inmate Bathroom Area*

 No Violations Noted

*Shower Area*

105 CMR 451.123 Maintenance: Light fixture not secured to ceiling in shower # 1

105 CMR 451.123 Maintenance: Ceiling tile missing outside shower # 2

105 CMR 451.123 Maintenance: Curtains missing for all showers

105 CMR 451.123 Maintenance: Soap dispenser missing

*Laundry*

 No Violations Noted

*Janitor’s Closet*

105 CMR 451.353 Interior Maintenance: Wet mop stored in slop sink

*Sleeping Area*

105 CMR 451.322 Cell Size: Inadequate floor space in dorm sleeping area

*B Unit Rec Cage*

105 CMR 451.360 Protective Measures: Birds nest observed

**FOOD SERVICE**

**Kitchen**

The following Food Code violations listed in **BOLD** were observed to be corrected on-site.

*Janitor’s Closet*

FC 6-501.16 Maintenance and Operation: Premises, Structure, Attachments, and Fixtures - Methods; Wet mop stored in slop sink

*Dry Food Storage*

FC 4-501.11(A) Maintenance and Operation, Equipment: Equipment not maintained in a state of good repair, small refrigerator not functioning properly, temperature recorded at 50°F

**FC 3-302.11(A)(4) Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Food not appropriately covered, dry pasta left uncovered**

FC 6-501.12(A) Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, bottom of dry storage cabinet dirty

FC 4-501.11(A) Maintenance and Operation, Equipment: Equipment not maintained in a state of good repair, inaccurate temperature measuring device on mobile hot holding units in hallway leading to dry storage

*Cooler # 1*

FC 3-501.18(A)(3) Limitation of Growth of Organisms of Public Health Concern, Temperature and Time Control: Refrigerated time/temperature control for safety food prepared on site or by a food processing plant was marked with a date or day the exceeds a temperature and time combination and was not discardedP, expired Tofu and Soy Milk observed

*Cooler # 2*

 No Violations Noted

*Freezer # 1*

**FC 3-302.11(A)(4) Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Food not appropriately covered, boxes of food left uncovered**

*3-Compartment Sink*

FC 4-903.11(B)(2) Protection of Clean Items; Storing: Equipment and Utensils not stored covered or inverted, bowls and pans not stored in the inverted position above the 3-Compartment sink and prep area near coolers

FC 5-205.15(B) Plumbing System; Operation and Maintenance: Plumbing system not maintained in good repair, right side faucet leaking

*Handwash Sink (near 3-Compartment Sink)*

**FC 5-205.11(B) Plumbing System; Operations and Maintenance: Handwashing sink used for an unapproved purposePf, hose draining into handwash sink**

*Kettle Area*

**FC 4-903-11(C) Protection of Clean Items, Storing: Single-Use Items not stored in an area where they are protected from contamination, single-use utensils left uncovered**

FC 4-501.11(A) Maintenance and Operation, Equipment: Equipment not maintained in a state of good repair, inaccurate temperature measuring device on mobile hot holding unit

*Ice Machine*

 No Violations Noted

*Dishwashing Machine Area*

FC 6-201.11 Design, Construction, and Installation; Cleanability: Ceiling not smooth and easily cleanable, paint damaged around ceiling vents

FC 6-501.12(A) Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, mold observed on ceiling above warewash machine

FC 6-501.12(A) Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, buildup of food debris observed in floor drain

*Handwash Sink (near dishwashing machine)*

FC 5-205.15(B) Plumbing System; Operation and Maintenance: Plumbing system not maintained in good repair, handwash sink leaking

*Prep Serving Line*

FC 6-501.12(A) Maintenance and Operation; Cleaning: Facility not cleaned properly, wall cooling fan dusty

FC 6-501.11 Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, floor tile damaged and debris collecting in gap

*Inmate Dining*

FC 6-201.11 Design, Construction and Installation: Floor not easily cleanable, paint damaged

FC 6-501.12(A) Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, food debris observed in window sills

**FC 4-501.114(C)(2) Maintenance and Operation; Equipment: Quaternary ammonium compound (QAC) solution lower than the manufacturers recommended concentration**

**Observations and Recommendations**

At the time of the food service inspection:

1. The CSP observed a refrigerator to not be functioning properly and holding food at the improper temperature. The CSP recommended the contents of the refrigerator be discarded for not being held at the proper cold holding temperature, and the officer agreed to discards the contents.
2. In the Kettle Area, workers were utilizing a reach-in cooler to store food to be discarded. The CSP recommended clearly identifying the function of the cooler to ensure food intended to be discarded is not accidently served.

**Attachment 2**

**Bristol County House of Corrections**

**COVID-19 Public Health Nursing Visit (June 25, 2020)**

**Supplementing the MDPH Bureau of Environmental Health Inspection Team**

**Submitted by: Glynnis LaRosa, MPH, MSN, RN, PHNA-BC, CPHQ and**

 **Katie Reilly, MPH, MSN, RN, PHNA-BC, CIC**

**Locations Visited:**

The two public health nurses visited the Health unit/Infirmary and the Intake area (where new inmates arrive). We were escorted throughout the facility by a Corrections Officer and one of the nurses, Barbara Bell, who gave us a tour of the Health unit. We also spoke to Maureen Atkins, the nursing supervisor who is also the main COVID-19 liaison to MDPH’s Epidemiology Division.

**Note: Subsequent to the MDPH 6/25/2020 site visit the MDPH Infectious Disease Bureau registered nurses received pdf files that were sent by the Bristol County Sheriff’s Office on a flash drive to the MDPH Bureau of Environmental Health. The contents of thumb drive appear to be an outdated Correctional Healthcare Infection Control Manual which was not dated and did not include a signature page so it could not be determined when it was last reviewed. This Correctional Healthcare Infection Control Manual did not include COVID-19 information. The other pdf files that were sent to the MDPH Bureau of Environmental Health by the Bristol County Sheriff’s Office had a variety of email correspondences and other documents relating to COVID-19 but they were not well organized.**

**Observations:**

* As we entered the facility, our temperatures were taken using a no-touch thermometer, and we were asked to answer 5 questions regarding travel history, contact with any positive COVID-19 cases, and if we had any current COVID-19 symptoms.
* As we toured the facility, we saw both staff and inmates wearing face coverings, either cloth or surgical-type masks. Most people were wearing their face coverings consistently and correctly. We did see a few people (inmates and staff) wearing their face mask/covering below their nose.
* Within the Health unit, there were numerous Health unit staff and a few inmates seeking care. As the number of people inside the unit increased, it became more difficult to socially distance due to the facility’s narrow hallways.
	+ The MD (Nicholas Rencricca) was onsite and he had just returned this week to the facility to perform in-person inmate assessments and examinations. Up until this week, the facility had been performing telehealth visits.
* Within the Health unit, we noted adequate supplies, including disinfecting wipes, PPE, soap, and hand sanitizer.
	+ We reviewed how to properly wear, disinfect and store PPE with the nursing staff.
	+ The nursing staff explained that each cell is terminally cleaned after it is vacated by an inmate.
* We noted that hand sanitizer dispensers were available on the wall throughout the facility for inmates and staff to use.
* In the Health unit and in the Intake area, we noticed posters and flyers which listed the symptoms of COVID-19. We also noticed posters for donning & doffing PPE in the nursing area, and other posters reviewing the importance of handwashing.

**The following information was gathered during conversations with Maureen Atkins, nursing supervisor, and Barbara Bell, staff nurse.**

* Per Maureen, staff members are screened at entry and if they have a temperature or symptoms, or were to get sick during their shift, they are sent home and referred for COVID-19 testing to their own healthcare provider.
* Maureen stated that she developed COVID-19 education that was shared with the nursing staff for inmate education on all cell blocks.
* Barbara informed us that the facility has not conducted widespread or baseline COVID-19 testing for all of the inmates.
	+ She stated that testing is performed on inmates if:
		- Symptomatic
		- Exposed
		- Requested
* Barbara stated that if inmates are experiencing any COVID-19 symptoms, they are isolated and tested.
* Barbara informed us that if inmates have been exposed to a case, they are quarantined and monitored for symptoms for 14 days.
* Barbara reported that COVID-19 positive inmates are housed separately on a COVID-19 unit (cell block), as well as inmates that have been exposed. This COVID-19 unit has two levels where inmates are housed. The COVID-19 positive inmates are housed on the top/second level and the suspect or contacts are housed on the bottom/ground floor level of the unit.
* Maureen stated that they have been able to keep COVID-19 positive and suspect inmates in their own separate cells that have solid walls and solid doors. Maureen went on to state that they did have to cohort inmates in May 2020 when the number of COVID-19 positive inmates increased.
* Barbara informed us that the new inmate intakes are quarantined in a separate unit for 14 days, before entering the general population.
* Maureen reported that Inmates on different units do not co-mingle.
* Maureen informed us that there are still no visitors allowed in the facility.
* Maureen stated that if an inmate requires a higher level of care that cannot be provided within the facility the inmate is transferred to St. Luke’s Hospital or the Charlton Memorial Hospital for pregnant female inmates. She noted that all inmates are masked when leaving the facility if a transfer is needed.

**Recommendations:**

* **The Bristol County Sheriff’s Office staff should work with their Infectious Disease physician consultant and their (CPS) Correctional Healthcare provider to ensure that their Correctional Healthcare Infection Control Manual is current and incorporates their COVID-19 plan.**
* Increase the amount of education given to inmates regarding COVID-19 symptoms and testing
	+ Healthcare staff is providing education on a one-on-one basis right now with the inmates, but we encouraged the nursing staff to provide education to a larger audience, to ensure all inmates have received the information
	+ Increase the amount of posted educational materials related to hygiene and COVID-19 symptoms throughout the facility
		- Include information in different languages (English, Spanish, Portuguese)
		- Supplement the written COVID-19 information with posters with pictures instead of words to ensure understanding among low literacy populations
			* CDC COVID-19 posters outlining symptoms (with pictures, and in different languages) available at: <https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc>
			* MDPH COVID-19 posters, covering a variety of topics, available at: <https://massclearinghouse.ehs.state.ma.us>
* Limit the number of inmates and staff that is in the Health unit/Infirmary at the same time given the facility’s space constraints e.g. narrow hallways to prevent overcrowding and to be able to maintain social distancing. This could be done through scheduling appointments for inmates and/or extending the Health unit hours.
* Healthcare staff is not currently N95 fit-tested for respirators, although Maureen is trying to set this fit-testing up for staff. We recommend that this is made a priority, to ensure the healthcare staff has adequate respiratory protection when in contact with inmates with respiratory symptoms, whether it is COVID-19, TB or other infectious diseases.