December 31, 2021

Robert Ogden, Sheriff
Dukes County Jail and House of Correction
P.O. Box 252
Edgartown, MA 02539

Re: Facility Inspection - Dukes County Jail and House of Correction, Edgartown

Dear Sheriff Ogden:

In accordance with M.G.L. c. 111, §§ 5, 20, and 21, as well as Massachusetts Department of Public Health (Department) Regulations 105 CMR 451.000: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facilities; 105 CMR 480.000: Storage and Disposal of Infectious or Physically Dangerous Medical or Biological Waste (State Sanitary Code, Chapter VIII); 105 CMR 590.000: Minimum Sanitation Standards for Food Establishments (State Sanitary Code Chapter X); the 2013 Food Code; 105 CMR 500.000 Good Manufacturing Practices for Food; and 105 CMR 205.000 Minimum Standards Governing Medical Records and the Conduct of Physical Examinations in Correctional Facilities; the Department’s Community Sanitation Program (CSP) conducted an inspection of the Dukes County Jail and House of Correction on December 16, 2021 accompanied by Lieutenant Colonel Durwood Araujo. Violations noted during the inspection are listed below including 23 repeat violations:

Should you have any questions, please don’t hesitate to contact me.

Sincerely,

Nicholas Gale
Environmental Analyst, CSP, BEH

cc:      Margret R. Cooke, Acting Commissioner, DPH
         Nalina Narain, Director, BEH
         Steven Hughes, Director, CSP, BEH
         Marylou Sudders, Secretary, Executive Office of Health and Human Services
         Carol A. Mici, Commissioner, DOC
         Thomas Turco, Secretary, EOPSS
         Timothy Gotovich, Director, Policy Development and Compliance Unit
         James Neville, Superintendent
         Greg Arpin, EHSO
         Matthew Poole, Health Agent, Edgartown Health Department
         Clerk, Massachusetts House of Representatives
         Clerk, Massachusetts Senate
HEALTH AND SAFETY VIOLATIONS
(* indicates conditions documented on previous inspection reports)

POLICE LOCK-UP AREA

Bail Office
No Violations Noted

Hallway
No Violations Noted

Booking Area
No Violations Noted

Male Holding Cell
105 CMR 451.320* Cell Size: Inadequate floor space
105 CMR 451.353 Interior Maintenance: Ceiling surface damaged

Female Holding Cell
105 CMR 451.341* Natural Light in Cell: No natural light source
105 CMR 451.320* Cell Size: Inadequate floor space
105 CMR 451.353* Interior Maintenance: Floor tile damaged outside cell

HOUSE OF CORRECTIONS

Control Area
105 CMR 451.353 Interior Maintenance: Unlabeled chemical bottle

Visit Room
No Violations Noted

Attorney Visit Room
105 CMR 451.350 Structural Maintenance: Exterior door rusted
105 CMR 451.350 Structural Maintenance: Exterior door not rodent and weathertight

Food Service Area

Office
No Violations Noted

Kitchen

3-Compartment Sink
No Violations Noted

Mechanical Warewashing Machine
No Violations Noted

Stove and Hood
No Violations Noted

Prep Table and Sink
No Violations Noted

Coffee Station and Small Refrigerator
No Violations Noted
Handwash Sink
No Violations Noted

Back Room
No Violations Noted

Pantry
No Violations Noted

Dining Room
No Violations Noted

**First Floor Units**

**Pre-Release Unit – Empty, No Inmates Housed**

Laundry Area
No Violations Noted

Bathroom
105 CMR 451.130*
Plumbing: Plumbing not maintained in good repair, hot water button sticks at handwash sink

Shower
No Violations Noted

Property Room
No Violations Noted

Cells
105 CMR 451.320*
Cell Size: Inadequate floor space in all cells

105 CMR 451.130*
Plumbing: Plumbing not maintained in good repair, plumbing out-of-order to cell # 3, 4, 5, and 6

105 CMR 451.130
Plumbing: Plumbing not maintained in good repair, plumbing out-of-order to cell # 1 and 2

Day Room
No Violations Noted

Canteen Room
No Violations Noted

**Administrative Segregation Unit**

Janitor's Closet
No Violations Noted

Hallway
No Violations Noted
<table>
<thead>
<tr>
<th>Section</th>
<th>Code</th>
<th>Violation Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cells</strong></td>
<td>105 CMR 451.320*</td>
<td>Cell Size: Inadequate floor space, double bunks in cells # 2 and 3</td>
</tr>
<tr>
<td></td>
<td>105 CMR 451.353*</td>
<td>Interior Maintenance: Floor paint damaged in cells # 1 and 3</td>
</tr>
<tr>
<td></td>
<td>105 CMR 451.113*</td>
<td>Toilet and Handwashing Sink in Locked Cells: No hot running water in locked cell # 1</td>
</tr>
<tr>
<td></td>
<td>105 CMR 451.113*</td>
<td>Toilet and Handwashing Sink in Locked Cells: No cold running water in locked cell # 2</td>
</tr>
<tr>
<td></td>
<td>105 CMR 451.113</td>
<td>Toilet and Handwashing Sink in Locked Cells: No cold running water in locked cell # 1</td>
</tr>
<tr>
<td><strong>Unit # 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hallway</strong></td>
<td>105 CMR 451.353</td>
<td>Interior Maintenance: Air conditioning wall unit leaking into hallway</td>
</tr>
<tr>
<td><strong>Cells</strong></td>
<td>105 CMR 451.320*</td>
<td>Cell Size: Inadequate floor space in all cells, double bunks in cells # 2 and 3</td>
</tr>
<tr>
<td><strong>Shower Stall</strong></td>
<td></td>
<td>No Violations Noted</td>
</tr>
<tr>
<td><strong>Unit # 2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Day Room</strong></td>
<td></td>
<td>No Violations Noted</td>
</tr>
<tr>
<td><strong>Hallway</strong></td>
<td></td>
<td>No Violations Noted</td>
</tr>
<tr>
<td><strong>Dorm Shower</strong></td>
<td></td>
<td>No Violations Noted</td>
</tr>
<tr>
<td><strong>Dorm Bathroom</strong></td>
<td></td>
<td>No Violations Noted</td>
</tr>
<tr>
<td><strong>Dorm Room</strong></td>
<td>105 CMR 451.322*</td>
<td>Cell Size: Inadequate floor space in dorm room</td>
</tr>
<tr>
<td></td>
<td>105 CMR 451.141*</td>
<td>Screens: Several screens damaged in window</td>
</tr>
<tr>
<td><strong>Storage Closet</strong></td>
<td></td>
<td>No Violations Noted</td>
</tr>
<tr>
<td><strong>Second Floor Units</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Main Hallway</strong></td>
<td></td>
<td>No Violations Noted</td>
</tr>
<tr>
<td><strong>Education Room</strong></td>
<td></td>
<td>No Violations Noted</td>
</tr>
<tr>
<td><strong>Nurse’s Office</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>105 CMR 480.500(B)</td>
<td>Procedures; Records; Record-Keeping Log: Generator did not maintain a record-keeping log for waste sent off-site for treatment</td>
</tr>
<tr>
<td></td>
<td>105 CMR 480.425(A)</td>
<td>Tracking Medical or Biological Waste for Treatment: Generator did not confirm the shipment was received by the treatment facility within 30 days on an approved tracking form</td>
</tr>
<tr>
<td><strong>Nurse’s Office Bathroom</strong></td>
<td></td>
<td>Unable to Inspect – Locked</td>
</tr>
</tbody>
</table>
Unit # 3

_Hallway_
105 CMR 451.141 Screens: One screen missing in window
105 CMR 451.141 Screens: One screen damaged in window

_Cells_
105 CMR 451.320* Cell Size: Inadequate floor space in all cells, all cells double banded
105 CMR 451.353* Interior Maintenance: Floor paint damaged in cell # 1
105 CMR 451.353 Interior Maintenance: Floor paint damaged in cell # 3

_Shower Stall_
No Violations Noted

Unit # 4

_Hallway_
No Violations Noted

_Cells_
105 CMR 451.320* Cell Size: Inadequate floor space, double banded in cell # 3

_Shower Stall_
No Violations Noted

_Arministration Area_

_Human Services_
No Violations Noted

_Staff Bathroom_
No Violations Noted

_3rd Floor_
No Violations Noted

_Office Bathroom_
No Violations Noted

_Hallway_
No Violations Noted

_Outside Areas_

_Outside Gym Area_
No Violations Noted

_Male Locker Room_
105 CMR 451.350 Structural Maintenance: Rear exterior door not rodent and weathertight

_Staff Bathroom_
No Violations Noted

_Female Locker Room_
No Violations Noted
No Violations Noted

Observations and Recommendations

1. The inmate population was 10 at the time of inspection.
2. At the time of the inspection:
   a. There was no bed in cell #1 in the Administrative Segregation Unit and the CSP was informed that the cell was not used; and
   b. Shower #1 in Unit #2 was not in use.

This facility does not comply with the Department’s Regulations cited above. In accordance with 105 CMR 451.404, please submit a plan of correction within 10 working days of receipt of this notice, indicating the specific corrective steps to be taken, a timetable for such steps, and the date by which correction will be achieved. The plan should be signed by the Superintendent or Administrator and submitted to my attention, at the address listed above.

To review the specific regulatory requirements please visit our website at www.mass.gov/dph/dcs and click on "Correctional Facilities" (available in both PDF and RTF formats).

To review the Food Establishment Regulations or download a copy, please visit the Food Protection website at www.mass.gov/dph/fpp and click on "Retail food". Then under DPH Regulations and FDA Code click "Merged Food Code" or "105 CMR 590.000 - State Sanitary Code Chapter X - Minimum Sanitation Standards for Food Establishments”.

To review the Labeling regulations please visit the Food Protection website at www.mass.gov/dph/fpp and click on “Food Protection Program regulations”. Then under Food Processing click “105 CMR 500.000: Good Manufacturing Practices for Food”.

This inspection report is signed and certified under the pains and penalties of perjury.

Sincerely,

Nicholas Gale
Environmental Analyst, CSP, BEH