



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
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Bureau of Environmental Health  
Community Sanitation Program  
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September 27, 2016

Frank G. Cousins, Jr., Sheriff  
Essex County Women in Transition  
20 Manning Avenue  
Middleton, MA 01949

Re: Facility Inspection – Essex County Women in Transition, Salisbury

Dear Sheriff Cousins:

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 1999 Food Code; 105 CMR 520.000 Labeling; and 105 CMR 205.000 Minimum Standards Governing Medical Records and the Conduct of Physical Examinations in Correctional Facilities; I conducted an inspection of the Essex County Women in Transition on September 21, 2016 accompanied Officer Jen Evans. Violations noted during the inspection are listed below including 3 repeat violations:

**HEALTH AND SAFETY VIOLATIONS**

(\* indicates conditions documented on previous inspection reports)

*Hallway*

No Violations Noted

*Office (# 2)*

No Violations Noted

*Program Coordinator's Office (# 3)*

No Violations Noted

*Deputy Superintendent's Office (# 4)*

105 CMR 451.200 Food Storage, Preparation and Service: Food storage not in compliance with 105 CMR 590.000, no functioning thermometer in refrigerator

*Laundry Room (# 5)*

No Violations Noted

*Staff Bathroom (# 6)*

No Violations Noted

|                                       |  |
|---------------------------------------|--|
| <i>Copy Room (# 7)</i>                | No Violations Noted  |
| <i>Hot Water Heater Room (# 8)</i>    | No Violations Noted  |
| <i>HSU (# 9)</i>                      |  |
| 105 CMR 480.500(A)(3)*                | Procedures; Records; Record-Keeping Log: Generator had no written documentation for blood borne pathogen training for individuals who may handle medical or biological waste |
| 105 CMR 480.500(A)                    | Procedures; Records; Record-Keeping Log: Generator had no written procedures for maintaining compliance with 480.000   |
| <i>Communication Room (# 10)</i>      | No Violations Noted  |
| <i>Visitor's Bathroom (# 12)</i>      | No Violations Noted  |
| <b>Dorm Rooms</b>                     |  |
| 105 CMR 451.322*                      | Cell Size: Inadequate floor space in all dorm rooms  |
| <i>Dorm Room (# 11)</i>               | No Violations Noted  |
| <i>Dorm Room (# 13)</i>               |  |
| 105 CMR 451.344                       | Illumination in Habitable Areas: Light not functioning properly, light out   |
| <i>Dorm Room (# 14)</i>               |  |
| 105 CMR 451.110(A)                    | Hygiene Supplies at Toilet and Handwash Sink: No paper towels at handwash sink   |
| 105 CMR 451.103                       | Mattresses: Mattress damaged   |
| <i>Dorm Room (# 15)</i>               |  |
| 105 CMR 451.344                       | Illumination in Habitable Areas: Light not functioning properly, light out   |
| <i>Dorm Room (# 16)</i>               | No Violations Noted  |
| <i>Dorm Room (# 17)</i>               | No Violations Noted  |
| <i>Shower Room (# 18)</i>             |  |
| 105 CMR 451.130*                      | Hot Water: Shower water temperature recorded at 120°F  |
| <i>Kitchen (# 19)</i>                 |  |
| FC 4-903.11(A)(2)                     | Protection of Clean Items, Storing: Single-service items not protected from contamination, disposable silverware left uncovered  |
| <i>Meeting and Dining Room (# 20)</i> | Unable to Inspect Meeting Room – In Use  |

## Observations and Recommendations

1. The inmate population was 20 at the time of inspection.
2. The Department recommended placing biohazard signage on the HSU door as well as placing a copy of the facilities safe handling and transportation procedures in the medical/biological waste record-keeping log to increase ease of access.

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](http://www.mass.gov/dph/dcs) and click on "Correctional Facilities" (available in both PDF and RTF formats).

To review the Food Establishment regulations please visit the Food Protection website at [www.mass.gov/dph/fpp](http://www.mass.gov/dph/fpp) and click on "Food Protection Regulations". Then under "Retail" click "105 CMR 590.000 - State Sanitary Code Chapter X – Minimum Sanitation Standards for Food Establishments" and "1999 Food Code".

To review the Labeling regulations please visit the Food Protection website at [www.mass.gov/dph/fpp](http://www.mass.gov/dph/fpp) and click on "Food Protection Regulations". Then under "General Food Regulations" click "105 CMR 520.000: Labeling."

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

Sincerely,



Kerry Wagner  
Environmental Health Inspector, CSP, BEH

cc: Jan Sullivan, Acting Director, BEH  
Steven Hughes, Director, CSP, BEH  
Timothy Miley, Director of Government Affairs  
Marylou Sudders, Secretary, Executive Office of Health and Human Services  
Thomas Turco, Commissioner, DOC  
Michael Marks, Superintendent  
Elizabeth Gilmartin, EHSO  
John Morris, CHO, Director, Salisbury Health Department  
Clerk, Massachusetts House of Representatives  
Clerk, Massachusetts Senate  
Daniel Bennett, Secretary, EOPSS  
Jennifer Gaffney, Director, Policy Development and Compliance Unit