

Office of the Corrections Ombudsperson

**State Prison Inspection Checklist**

Name of Facility: New Jersey State Prison

Address: PO Box 861

City/State/Zip Code: Trenton, New Jersey 08625

Telephone Number: 609-292-9700

Administrator or Designee: Jonathan Gramp

Date of Inspection: March 31, 2021

Conducted by: John Blakeslee

Title: Assistant Ombudsman

Conducted by: Melissa Matthews

Title: Assistant Ombudsman

Type of Inspection: Scheduled  Unscheduled

Housing Unit: 3DD

Capacity: Total: 48 Male: X Female:

Inspection date population: Total: 48 Male: X Female:

Number of cells: 48 Single: 48 Double: Triple: Quadruple:

Number of beds: 48 Other:

How many Custody Staff members were on the unit at the time of the inspection? 3

Did the Administrator/Designee or Custody Supervisor accompany you during the inspection?

YES  N/A  NO

Name of staff member: Amy Emrich  
C. Danielson

Title: Assistant Superintendent  
Lieutenant



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**I Living Conditions**

- 1.) Does the bedding include a mattress cover or sheet? YES  N/A  NO
- 2.) Is bed covering appropriate to the season? YES  N/A  NO
- 3.) Do all beds contain a pillow? YES  N/A  NO
- a. Number of beds without a pillow: 1
- 4.) Do all beds contain a mattress? YES  N/A  NO
- a. Number of beds without a mattress: 0
- 5.) Do all inmates have access to hot and cold water? YES  N/A  NO
- 6.) Do all inmates have access to a properly functioning toilet? YES  N/A  NO
- 7.) Are restrooms and showers visibly clean and free of mold and mildew? YES  N/A  NO
- 8.) Do all inmates have access to a telephone? YES  N/A  NO
- 9.) Is the unit comfortably heated or cooled according to the season? YES  N/A  NO
- 10.) Are all windows operable? YES  N/A  NO
- 11.) Do common area floors appear to be neat, clean, and free of any obstacles? YES  N/A  NO
- 12.) Do all areas appear to be free of insects or rodents? YES  N/A  NO
- 13.) Are all openings to the outside protected to prevent entrance of insects or rodents? YES  N/A  NO

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- 14.) Does the lighting on the unit appear to be appropriate? YES  N/A  NO
- 15.) Does the unit contain inmate telephones? YES  N/A  NO
- 16.) Are all telephones in working order at the time of inspection? YES  N/A  NO
- 17.) Does the unit contain a JPAY kiosk? YES  N/A  NO
- Amount of JPAY kiosks: 1
- 18.) Is/are the JPAY kiosk(s) working properly at the time of inspection? YES  N/A  NO

**II Food Service**

- 1.) Are meals served in the housing unit YES  N/A  NO   
or dining hall? YES  N/A  NO
- 2.) Are heated or insulated carts or trays used for the Transportation of food from the kitchen? YES  N/A  NO
- 3.) Are food and drinks protected from contaminants during delivery? YES  N/A  NO
- 4.) Are divided compartmented trays utilized for meal service? YES  N/A  NO
- 5.) Are the divided compartmented trays in satisfactory condition? YES  N/A  NO
- 6.) Are Food Service Staff and inmates handling food wearing appropriate safety gear such as hair nets and gloves? YES  N/A  NO

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**III Sanitation**

- 1.) Are non-carpeted floors swept and mopped with detergent or germicidal agent at least once daily? YES  N/A  NO
- 2.) Are germicidal cleaning agents used on the floors, showers, and food service areas? YES  N/A  NO
- 3.) Are the windows clean? YES  N/A  NO
- 4.) Are all areas free of trash and debris? YES  N/A  NO
- 5.) Are cleaning implements and equipment cleaned, dried, and securely stored after use? YES  N/A  NO
- 6.) Are toilets, washbasins, showers, and sinks cleaned and sanitized daily? YES  N/A  NO
- 7.) Is trash and garbage contained and disposed of in a sanitary manner? YES  N/A  NO
- 8.) Are sheets, pillow cases and mattress covers changed and washed at least once a week? YES  N/A  NO
- 9.) Are vinyl covered mattresses washed with hot water, detergent and disinfected monthly? YES  N/A  NO
- 10.) Are blankets laundered or sterilized at least once every six months pursuant to the N.J.A.C. 10A:14-5.12? YES  N/A  NO
- 11.) Does the facility have an established rodent, pest and vermin control program? YES  N/A  NO
- 12.) Do all inmates have access to cleaning supplies for use in their cells/dorms? YES  N/A  NO

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**IV Safety**

- 1.) Are fire extinguishers readily accessible to staff, but not inmates? YES  N/A  NO
- 2.) Are fire extinguishers examined at least once a year and tagged with the date of inspection and initials of the inspector? YES  N/A  NO
- 3.) Are working cameras visible on the unit? YES  N/A  NO
- 4.) Do all inmates have two masks at this time? YES  N/A  NO
- 5.) Are all staff wearing masks properly? YES  N/A  NO

**V General**

- 1.) Are the appropriate forms utilized by the inmate population available on the housing unit? YES  N/A  NO
- MR007 Sick Call Request Form* YES  N/A  NO
- MR022 Medical Records Request Form* YES  N/A  NO
- Inmate Inquiry Form* YES  N/A  NO
- Inmate Grievance Form* YES  N/A  NO
- Property Claim Form* YES  N/A  NO
- Law Library Request Form* YES  N/A  NO
- Social Services Request Form* YES  N/A  NO
- GTL Telephone Discrepancy Form* YES  N/A  NO
- Office of the Corrections Ombudsperson Request For Assistance Form* YES  N/A  NO
- 2.) Do all inmates have access to the appropriate forms? YES  N/A  NO

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***Inspector's comments:***

Unit tour began at approximately 9:30 am with Lt. Danielson and Assistant Superintendent Emrich. The housing unit was noted to be clean and staff were cooperative with the inspection. The Assistant Ombudspersons visually inspected each cell and attempted to speak to the inhabitants of the cell, while minimizing disruptions to the unit.

Section I - One inmate reported that he did not have pillow; however, staff were notified and they immediately provided the inmate with a pillow. One inmate reported that his sink was clogged. One inmate reported that one of the two light bulbs in the fixture was burned out. Work orders were submitted to the Maintenance Department for these two issues. It is noted that the unit is climate controlled and although each cell has a window, they are not designed to be opened. The showers were noted to be visibly clean and free of mold and mildew; however, they are in need of painting. It is likely that normal cleaning would cause wear on the paint. It is noted that because the inmates assigned to this unit have limited movement, NJSP installed a law library kiosk that allows inmates to conduct legal research without leaving the unit.

Section II - Meals are prepared on the unit; therefore, there is no need to transport food in heated or insulated carts. Meals are served in new, disposable, clamshell containers.

Section III - Cleaning products available for inmate use are germicidal and disinfectants. These supplies are available upon inmate request. Each inmate indicated that they had access to the cleaning supplies.

Section IV - No issues noted.

Section V - All forms were found to be on the unit, and in plentiful supply

***Administrator or Designee's comments and corrective action taken:***

All minor maintenance issues were confirmed, and work orders submitted. The maintenance department was dispatched to facilitate the repairs and the work was completed prior to the close of business, following the inspection.

Reminders were sent to staff regarding the appropriate reporting via the work order submission database when finding routine maintenance issues as well as the proper procedure to request additional supplies as needed, to include mold/mildew resistant paint for the showers.

NJSP will continue to monitor and conduct routine in house inspections in an effort to maintain the highest standards for the population.

Name: John Blakeslee  
Melissa Matthews

Title: Assistant Ombudsperson  
Assistant Ombudsperson

Date: March 31, 2021