

Office of the Corrections Ombudsperson

State Prison Inspection Checklist

Name of Facility: Bayside State Prison

Address: 4293 Route 47

City/State/Zip Code: Leesburg, NJ 08327

Telephone Number: 609-785-0040

Administrator or Designee: Bruce Davis, Administrator

Date of Inspection: April 13, 2021

Conducted by: John Blakeslee

Title: Assistant Ombudsperson

Conducted by: Amy Southwick

Title: Assistant Ombudsperson

Type of Inspection: Scheduled ☒ Unscheduled ☐

Housing Unit: A Unit

Capacity:	Total:	168	Male:	168	Female:	0
-----------	--------	-----	-------	-----	---------	---

Inspection date population:	Total:	145	Male:	145	Female:	0
-----------------------------	--------	-----	-------	-----	---------	---

Number of cells:	84	Single:	0	Double:	84	Triple:		Quadruple:	0
------------------	----	---------	---	---------	----	---------	--	------------	---

Number of beds:	168	Other:	
-----------------	-----	--------	--

How many Custody Staff members were on the unit at the time of the inspection? 2

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

YES ☒ N/A ☐ NO ☐

Name of staff member: Alycia Lewis
 Oliver Keller

Title: Assistant Superintendent
 Major

Page 2
Inspection Checklist

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: 19
- 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 ☐

Page 3
Inspection Checklist

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: 2

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 ☐

III Sanitation

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

IV Safety

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

V General

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

Page 6
Inspection Checklist

Inspector's comments:

The unit tour began at 9:10 am with Assistant Superintendent Lewis and Major Keller. Overall, it was observed that the housing unit was clean. The housing unit officers were helpful and assisted by answering the inspector's questions. The inspectors were able to speak with every available inmate while conducting this inspection.

Section- I A total of nineteen inmates reported that they did not have a pillow. One inmate noted that his mattress cover was ripped. Two lighting issues were observed; one lighting fixture that would not turn off and the other would not turn on. One inmate advised that the buttons on the sink would stick, resulting in water that continuously ran. The missing items and maintenance issues were immediately reported to Assistant Superintendent Lewis and Major Keller for resolution. Within a few hours of the inspection, pillows were provided to all nineteen inmates who were missing a pillow and the mattress with a ripped cover was replaced. Maintenance work orders were submitted for the cells with lighting and sink issues. The inmates assigned to the cell with the malfunctioning sink were moved to a different cell with a functioning sink.

The inspectors observed that the unit contains ten telephones and two JPay kiosks. The inspectors believe that a unit as large as this should have more kiosks available. The unit showers were relatively clean, but did have what appeared to be mildew and were in need of painting.

Section - II The inspectors were not on the unit while a meal was being served. Staff advised that the food is brought to the unit in insulated carts and the food is served on hard trays. The officer advised that the trays were relatively new and in good condition. It was reported that those inmates that serve the food wear hair nets, gloves and masks.

Section - III The housing unit officer showed the inspector the cleaning supplies available on the housing unit and advised that they are available to inmates upon request. All inmates advised the inspectors that they have access to the cleaning supplies to clean their cells.

Section - IV Fire extinguishers are kept in locked boxes in several locations around the housing unit. Those that were available to the inspectors were found to have valid inspection tags. However, one of the locked boxes on the "flats" was missing a fire extinguisher and one of the boxes on the mezzanine would not open to allow access to the fire extinguisher. Upon completion of the inspection, Assistant Superintendent Lewis advised that per the Bayside State Prison Fire Marshall, the missing fire extinguisher was out for service and would be replaced tomorrow, April 14, 2021. The box that would not open was referred to the locksmith and the issue was rectified. Three inmates reported that they only had one fabric mask; and one inmate reported that they only had one disposable surgical mask. The assistant superintendent and major were advised of the missing masks. The major advised that fabric masks were provided by the Special Operations Group (SOG) and he would need to check to see if any were currently available. At the conclusion of the inspection, the major advised that Bayside was not in possession of any additional cloth masks; as a result, disposable masks were issued to those inmates with only one mask.

Section - V Forms are available from the housing officer. It was noted that the Medical Records Request Form (MR-022), Inmate Grievance Form and Property Claim Form were not available at the time of the inspection. While the indicated forms were not available, it should be noted that the inmates do have access to file grievances through the JPAY kiosk; however, with only two available kiosks, access to file Inquiries or Grievance could be an issue. Property claims and medical record requests cannot be filed via the JPay kiosk. The Assistant Superintendent and Major were informed about the missing forms. Within several hours of the completion of the inspection, Assistant Superintendent Lewis informed the inspectors that the forms were in the process of being obtained and placed in the housing unit.

Administrator or Designee's comments and corrective action taken:

Name: John Blakeslee
Amy Southwick

Title: Assistant Ombudsperson
Assistant Ombudsperson

Date: April 13, 2021

Bayside State Prison

4293 Route 47
Leesburg, New Jersey 08327
(856) 785-0040

DATE: April 15, 2021

TO: John Blakeslee, Assistant Ombudsperson
Amy Southwick, Assistant Ombudsperson

FROM: Alycia Lewis, Assistant Superintendent
Oliver Keller, Security Major

SUBJECT Ombudspersons' Inspection 04/13/2021

In response to the Ombudspersons' inspection conducted at Bayside State Prison on 04/13/2021, please see below items of concern that were noted during the inspection. The responses detail corrective actions taken on the part of BSP Administration.

Section 1 – Living Conditions

#3 - All inmates who were missing a pillow were provided with one on 04/13/2021. Additionally, as remedial action BSP will require that all inmates sign for receipt of bed roll and pillow upon arrival to BSP.

#7 - As a part of regular cleaning protocols, mold/mildew remediating cleaning supplies have been made available on the housing unit. Additionally, due to enhanced COVID19 related cleaning protocols, each housing unit is provided with a supply of diluted bleach solution for regular and routine cleanings.

Section 4 – Safety

#1 - During the inspection, a cabinet that normally contains a fire extinguisher was found to be empty. This extinguisher was removed by the Institutional Fire Marshall for routine servicing and has since been returned to its designated area. It should be noted that, per state fire code requirements, the absence of that fire extinguisher at the time of inspection did not place us in violation of current fire code requirements. Each housing unit on the Medium compound has 9 fire extinguishers present which exceeds the number required by the fire code. Additionally, an extinguisher cabinet was unable to be accessed at the time of the inspection. This issue was rectified by the lock smith immediately following the conclusion of the Ombudspersons' inspection.

#4 - Inmates identified as not having two masks were provided with disposable masks. Additionally, a stock of disposable masks have been placed in each housing unit to be available upon inmate request. Cloth masks have been distributed to the population

multiple times over the past year. BSP is awaiting future allocations of cloth masks from SOG for distribution to the inmate population.

Section 5 - General

#1 - All missing forms were obtained and made available on the housing unit immediately following the conclusion of the Ombudspersons' inspection.