The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Bureau of Climate and Environmental Health
Division of Environmental Health Regulations and Standards
67 Forest Street, Suite # 100
Marlborough, MA 01752
617-624-6000 | mass.gov/dph

Maura T. Healey
Governor

Kimberley Driscoll
Lieutenant Governor

Kiame Mahaniah, MD, MBA
Secretary

Robert Goldstein, MD, PhD
Commissioner

August 13, 2026

To:
Shawn Jenkins, Commissioner, Department of Corrections (electronic copy)
Kiame Mahaniah, MD, MBA, Secretary, Executive Office of Health and Human Services (electronic copy)
Clerk, Massachusetts House of Representatives (electronic copy)
Clerk, Massachusetts Senate (electronic copy)
Michael Beland, Environmental Health and Safety Officer (electronic copy)

Greetings,

Pursuant to 105 CMR 451.403, please find the inspection report for MCI Framingham, the Plan of Correction (POC) from the facility and the POC acceptance letter from the Division of Environmental Health Regulations and Standards (EHRS).

Sincerely,

Hannah LeBeau

Hannah LeBeau
Environmental Analyst, EHRS, BCEH

Cc:
Robert Goldstein, MD, PhD, Commissioner, DPH (electronic copy)
Gina K. Kwon, Secretary, Executive Office of Public Safety and Security (electronic copy)
Bill Murphy, Health Director, Framingham Board of Health (electronic copy)
Brianna Arruda, Director, Policy Development and Compliance Unit (electronic copy)
Ryan Donlon, Superintendent (electronic copy)

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
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Maura T. Healey
Governor

Kimberley Driscoll
Lieutenant Governor

Kiame Mahaniah, MD, MBA
Secretary

Robert Goldstein, MD, PhD
Commissioner

June 5, 2026

Ryan Donlon, Superintendent
MCI Framingham
99 Loring Drive
P.O. Box 9007
Framingham, MA 01704 (electronic copy)

Re: Facility Inspection – MCI Framingham

The Massachusetts Department of Public Health (Department) Division of Environmental Health Regulations and Standards (EHRS) conducted an inspection of MCI Framingham on May 14 and 15, 2026 accompanied by Michael Beland, Environmental Health and Safety Officer, in accordance with Department regulations 105 CMR 451.000: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facilities.

The inspection identified 68 total deficiencies: 37 new deficiencies under the Required Standards (.100 and .200 series), 17 repeat deficiencies under the Required Standards, 5 new deficiencies under the Recommended Standards (.300 series), and 9 repeat deficiencies under the Recommended Standards.

Overview

Section 1 provides details of all deficiencies, including repeat deficiencies, found during the inspection. These are categorized by Required Standards, Recommended Standards, or additional applicable regulatory standards.

Section 2 provides information on areas that EHRS found to be compliant.

Section 3 documents the areas that EHRS did not inspect.

Section 4 provides information on submitting a Plan of Correction for the identified deficiencies.

Section 5 outlines observations and recommendations related to the inspection.

SECTION 1: Health and Safety Deficiencies

Main Building

Deficiencies under the Required Standards (.100 and .200 series)

19 new deficiencies and 5 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	Lobby	Janitor's Closet		105 CMR 451.130*	Plumbing: Plumbing not maintained in good repair, drain cover not secure at slop sink
2.	Visiting Area	Common Area		105 CMR 451.200*	Food Storage, Preparation and Service: Food storage not in compliance with 105 CMR 590.000, sandwiches observed with use-by date of 5/10/26 in vending machine
3.	Smith Food Service # 173			105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, ceiling tiles water damaged. Standard found in 105 CMR 590; FC 6-501.11
4.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Walls dirty in shower # 2
5.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Panel separating from wall in shower # 3
6.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Beam dirty outside of showers
7.	ATU East	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Floor dirty in shower # 1 and 2
8.	ATU West	Cell Block	Lower Level Showers	105 CMR 451.123*	Maintenance: Caulking damaged in shower # 3
9.	ATU West	Cell Block	Lower Level Showers	105 CMR 451.123*	Maintenance: Caulking dirty in shower # 1
10.	New Line	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 2 and 3
11.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1, 2, and 3
12.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Floor dirty in shower # 1 and 2
13.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Walls dirty in shower # 2
14.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Baseboard dirty in shower # 2
15.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1
16.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Dead drain flies observed on ceiling in shower # 1
17.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Drain flies observed in shower # 1
18.	BAU	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1 and 2

Deficiencies under the Recommended Standards (.300 series)

3 new deficiencies and 2 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	Admissions	Fingerprint Room # C148A		105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged
2.	Admissions	Storage Room # 107A		105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged
3.	ATU West	Cell Block	Lower Level Janitor's Closet	105 CMR 451.353	Interior Maintenance: Standing water stored in mop bucket
4.	New Line	Cell Block	Lower Level Janitor's Closet	105 CMR 451.353	Interior Maintenance: Standing water stored in mop bucket
5.	New Line	Cell Block	Cells	105 CMR 451.353	Interior Maintenance: Floor tiles damaged in cell # 152

HSU Building

Deficiencies under the Required Standards (.100 and .200 series)

2 new deficiencies were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	1st Floor	Clinical Area	Staff Bathroom # 3	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, drain cover missing at handwash sink
2.	1st Floor	Clinical Area	Inmate Bathroom # 5	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, hot water control leaking at handwash sink

Deficiencies under the Recommended Standards (.300 series)

1 new deficiency and 1 repeat deficiency (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	1st Floor	Infirmary	All Cells	105 CMR 451.320*	Cell Size: Inadequate floor space in all cells
2.	1st Floor	Infirmary	Biohazard Storage Room	105 CMR 451.353	Interior Maintenance: Wall vent dusty

Cottages

Deficiencies under the Required Standards (.100 and .200 series)

8 new deficiencies and 10 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	Laurel Building	Kitchen Area	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, handwash sink leaking from below
2.	Laurel Building	Common Area	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, left side bubbler out-of-order in A side hallway
3.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Grout dirty in shower # 1, 2, and 3
4.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Ceiling tiles missing
5.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Ceiling tiles not secure
6.	Laurel Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Grout dirty in shower # 3

	Area	Sub Area # 1	Regulation	Description of Deficiency
7.	Laurel Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Mold on grout in shower # 2
8.	Laurel Building	Shower Room (B & C)	105 CMR 451.123	Maintenance: Floor paint damaged in shower # 3
9.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Metal brackets rusted in shower # 3
10.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Mold on grout in shower # 1, 2, and 3
11.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Grout damaged in shower # 1, 2, and 3
12.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Ceiling panels not secure

Old Administration Building

Deficiencies under the Required Standards (.100 and .200 series)

3 new deficiencies were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	C Corridor	Culinary Arts	Kitchen	105 CMR 451.200	Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Raw animal food not stored separate from cooked ready-to-eat food (Pf), raw eggs stored above ready-to-eat food. Standard found in 105 CMR 590; FC 3-302.11(A)(1)(b). **** Corrected On-Site ****
2.	C Corridor	Main Serving Room	Serving Line	105 CMR 451.200	Limitation of Growth of Organisms of Public Health Concern, Temperature and Time Control: Time/temperature control for safety food not held at 41°F or less (Pf), temperature of coleslaw recorded at 50°F. Standard found in 105 CMR 590; FC 3-501.16(A)(2). **** Corrected On-Site ****
3.	C Corridor	Main Serving Room	Mechanical Warewashing Room	105 CMR 451.200	Numbers and Capacities, Utensils, Temperature Measuring Devices, and Testing Devices: No irreversible registering temperature measuring device readily accessible to measure the surface temperature of the utensil (Pf). Standard found in 105 CMR 590; FC 4-302.13(B).

Deficiencies under the Recommended Standards (.300 series)

1 new deficiency and 5 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	B Corridor	Offices	105 CMR 451.353*	Interior Maintenance: Ceiling tiles missing and water damaged
2.	C Corridor		105 CMR 451.353*	Interior Maintenance: Floor tile missing and damaged throughout
3.	2nd Floor	Parole	105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged in Room # 205
4.	2nd Floor	Industries # 224	105 CMR 451.353*	Interior Maintenance: Floor damaged in shipping and receiving room
5.	Basement	Laundry Area	105 CMR 451.350*	Structural Maintenance: Exterior door not rodent and weathertight
6.	Basement	Property	105 CMR 451.353	Interior Maintenance: Laundry detergent stored in food container

Central Kitchen

Deficiencies under the Required Standards (.100 and .200 series)
5 new deficiencies and 2 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	Kitchen Area	Handwash Sink	105 CMR 451.200	Plumbing System; Design, Construction and Installation: Insufficient hot water temperature at handwashing sinks (Pf), temperature recorded at 104°F. Standard found in 105 CMR 590; FC 5-202.12(A).
2.	Kitchen Area	Prep Area	105 CMR 451.200	Protection from Contamination After Receiving, Preventing Food and Ingredient Contamination: Food or food ingredients that have been removed from original packages not labeled with common name of food, unlabeled alfredo sauce in refrigerator near inmate break area. Standard found in 105 CMR 590; FC 3-302.12. ** **Corrected On-Site** **
3.	Kitchen Area	Dry/Baking Storage	105 CMR 451.200*	Protection from Contamination After Receiving; Preventing Contamination from Equipment, Utensils, and Linens: Utensil handle not stored above the food in the container, scoop stored in flour container. Standard found in 105 CMR 590; FC 3-304.12(B). ** **Corrected On-Site** **
4.	Kitchen Area	Refrigerator # 5	105 CMR 451.200	Preventing Contamination from the Premises; Food Storage: Food not stored at least 6" off the ground, juice stored in milk crate on the ground. Standard found in 105 CMR 590; FC 3-305.11(A)(3). ** **Corrected On-Site** **
5.	Kitchen Area	Refrigerator # 5	105 CMR 451.200	Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Raw animal food not stored separate from cooked ready-to-eat food (Pf), raw ground beef stored above cooked chicken. Standard found in 105 CMR 590; FC 3-302.11(A)(1)(b). ** **Corrected On-Site** **
6.	Kitchen Area	2-Compartment Sinks	105 CMR 451.200	Plumbing System; Operation and Maintenance: Plumbing system not maintained in good repair, drain cover not secure. Standard found in 105 CMR 590; FC 5-205.15(B).
7.	Food Manager's Office		105 CMR 451.200*	Design, Construction, and Installation; Cleanability: Floors not smooth and easily cleanable, floor paint damaged. Standard found in 105 CMR 590; FC 6-201.11.

Power Plant

Deficiencies under the Recommended Standards (.300 series)
1 repeat deficiency (indicated by an *) was found during the inspection:

	Area	Regulation	Description of Deficiency
1.	Building Exterior	105 CMR 451.350*	Structural Maintenance: Stairs at entrance damaged and deteriorated

SECTION 2: Areas Found to be in Compliance

EHRS inspected 220 additional areas of the facility which were found to be in compliance

SECTION 3: Areas EHRS did not Inspect

EHRS did not inspect 3 areas of the facility because they were either in use, locked, or under construction.

	Area	Sub Area # 1	Sub Area # 2	Description of Deficiency
1.	HSU Building	Barton (2nd Floor)	Showers	Unable to Inspect – In Use
2.	Cottages	Algon Building	Shower Room (A & B)	Unable to Inspect – In Use
3.	Vehicle Trap	Maintenance Building		Unable to Inspect – Locked

SECTION 4: Plan of Correction

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 which includes:

1. Specific corrective steps to be taken
2. A timetable for the corrective actions for larger projects
3. The date by which correction will be achieved
4. Any interim measures being implemented to ensure the health and safety of incarcerated individuals and facility staff
5. A signature by the Superintendent or Administrator responsible for the plan. The signed plan should be submitted to my attention, at the address listed above.

SECTION 5: Observations and Recommendations

1. The inmate population was 250 at the time of inspection.

To review the specific regulatory requirements, please visit the Massachusetts Department of Public Health Regulatory and Compliance Unit and read the minimum health and sanitation standards for correctional facilities available in both PDF and RTF formats. For more specific information about the food standards, you can download the merged food code.

An inspection may also include observations of other conditions which could constitute a threat to the health or safety of inmates or employees, including but not limited to the standards set forth by the Department as follows, and report on such pursuant to 451.402(B). You can use these links below to review these standards:

- 105 CMR 205.000: Minimum Standards Governing Medical Records and Conduct of Physical Examinations in Correctional Facilities
- 105 CMR 480.000: Minimum requirements for the Management of Medical or Biological Waste
- 105 CMR 500.000: Good Manufacturing Practices for Food

This inspection report is true and accurate to the best of my knowledge.

Sincerely,

Hannah LeBeau

Hannah LeBeau
Environmental Health Officer, EHRS, BCEH

The Commonwealth of Massachusetts
Executive Office of Public Safety & Security
Department of Correction
MCI Framingham
99 Loring Drive, P.O. Box 9007
Framingham, MA 01701
Tel: (508) 532-5100
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Secretary

SHAWN P. JENKINS
Commissioner

June 30, 2026

Hannah LeBeau, Environmental Health Inspector, EHRS, BCEH
Department of Public Health
Community Sanitation Program
67 Forest Street, Suite #100
Marlborough, MA 01752

Re: MCI Framingham – Plan of Correction

Dear Ms. LeBeau,

Attached please find MCI-Framingham's response to violations noted in your letter dated June 5, 2026.

Please feel free to contact me if you should have any additional questions or concerns.

Sincerely,

Ryan Donlon
Superintendent

RD/pb

cc: Shawn Jenkins, Commissioner, DOC
Brianna Arruda, Director, Policy Development and Compliance Unit, DOC
Michael Beland, EHSO, MCI Framingham
File

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June 5, 2026

Ryan Donlon, Superintendent
MCI Framingham
99 Loring Drive
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Re: Facility Inspection – MCI Framingham

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SECTION 1: Health and Safety Deficiencies

Main Building

Deficiencies under the Required Standards (.100 and .200 series)
19 new deficiencies and 5 repeat deficiencies (indicated by an *) were found during the inspection:

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1.	Lobby	Janitor's Closet		105 CMR 451.130*	Plumbing: Plumbing not maintained in good repair, drain cover not secure at slop sink Drain will be secured with an anticipation date of 7/7/26.
2.	Visiting Area	Common Area		105 CMR 451.200*	Food Storage, Preparation and Service: Food storage not in compliance with 105 CMR 590.000, sandwiches observed with use-by date of 5/10/26 in vending machine Expired food removed on 5/15/26.
3.	Smith Food Service # 173			105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, ceiling tiles water damaged. Standard found in 105 CMR 590; FC 6-501.11 Ceiling tiles will be repaired with an anticipation date of 7/7/26.
4.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Walls dirty in shower # 2 Walls cleaned on 5/14/26. Anticipated deep clean date by 7/6/26.
5.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Panel separating from wall in shower # 3 Panel repaired on 5/14/26. Reseal with stripping with an anticipated date of 7/6/26.
6.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Beam dirty outside of showers Beam cleaned on 5/14/26. Anticipated deep clean date by 7/6/26..
7.	ATU East	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Floor dirty in shower # 1 and 2 Floors cleaned on 5/14/26. Anticipated deep clean date by 7/6/26.
8.	ATU West	Cell Block	Lower Level Showers	105 CMR 451.123*	Maintenance: Caulking damaged in shower # 3 Caulking repaired with an anticipation date of 7/7/26.
9.	ATU West	Cell Block	Lower Level Showers	105 CMR 451.123*	Maintenance: Caulking dirty in shower # 1 Caulking cleaned on 5/14/26. Anticipated deep clean date by 7/6/26.

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
10.	New Line	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 2 and 3 Caulking cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
11.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1, 2, and 3 Caulking cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
12.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Floor dirty in shower # 1 and 2 Walls cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
13.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Walls dirty in shower # 2 Walls cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
14.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Baseboard dirty in shower # 2 Baseboard cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
15.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1 Caulking cleaned on 5/14/26. Anticipated deep clean date by 7/8/26.
16.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Dead drain flies observed on ceiling in shower # 1 Shower cleaned on 5/14/26. Anticipated deep clean date by 7/8/26.
17.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Drain flies observed in shower # 1 Shower cleaned on 5/14/26. Drain flies removed on 5/14/26. Pest control on site 5/19/26 and will continue to monitor. Anticipated deep clean date by 7/8/26
18.	BAU	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1 and 2 Caulking cleaned on 5/14/26. Anticipated deep clean date by 6/23/26.

Deficiencies under the Recommended Standards (.300 series)

3 new deficiencies and 2 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	Admissions	Fingerprint Room # C148A		105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged Ceiling tiles will be replaced with an anticipation date of 7/8/26.
2.	Admissions	Storage Room # 107A		105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged Ceiling tiles will be replaced with an anticipation date of 7/8/26.
3.	ATU West	Cell Block	Lower Level Janitor's Closet	105 CMR 451.353	Interior Maintenance: Standing water stored in mop bucket Standing water removed from bucket on 5/14/26
4.	New Line	Cell Block	Lower Level Janitor's Closet	105 CMR 451.353	Interior Maintenance: Standing water stored in mop bucket Standing water removed from bucket on 5/14/26
5.	New Line	Cell Block	Cells	105 CMR 451.353	Interior Maintenance: Floor tiles damaged in cell # 152 Floor tiles will be replaced with an anticipation date of 7/8/26.

HSU Building

Deficiencies under the Required Standards (.100 and .200 series)
2 new deficiencies were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	1st Floor	Clinical Area	Staff Bathroom # 3	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, drain cover missing at handwash sink Drain cover will be installed with an anticipation date of 7/7/26
2.	1st Floor	Clinical Area	Inmate Bathroom # 5	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, hot water control leaking at handwash sink Water control will be repaired with an anticipation date of 7/7/26

Deficiencies under the Recommended Standards (.300 series)
1 new deficiency and 1 repeat deficiency (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	1st Floor	Infirmary	All Cells	105 CMR 451.320*	Cell Size: Inadequate floor space in all cells Inmates were removed out of the unit to comply with 105 CMR 451.320 on 5/14/26.
2.	1st Floor	Infirmary	Biohazard Storage Room	105 CMR 451.353	Interior Maintenance: Wall vent dusty

Wall vent cleaned on 5/14/26.

Cottages

Deficiencies under the Required Standards (.100 and .200 series)
8 new deficiencies and 10 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	Laurel Building	Kitchen Area	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, handwash sink leaking from below Handwash sink will be repaired with an anticipation date of 7/9/26.
2.	Laurel Building	Common Area	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, left side bubbler out-of-order in A side hallway Water bubbler will be removed with an anticipation date of 7/10/26.
3.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Grout dirty in shower # Grout cleaned on 5/15/26. Anticipated deep clean date by 7/9/26..
4.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Ceiling tiles missing New ceiling tiles will be installed with an anticipation date of 7/10/26.
5.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Ceiling tiles not secure Ceiling tiles will be resecure with an anticipation date of 7/10/26.
6.	Laurel Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Grout dirty in shower # 3 Grout cleaned on 5/15/26. Anticipated deep clean date by 7/9/26.
7.	Laurel Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Mold on grout in shower # 2 Mold removed on 5/15/26. Anticipated deep clean date by 7/9/26.
8.	Laurel Building	Shower Room (B & C)	105 CMR 451.123	Maintenance: Floor paint damaged in shower # 3 Floor will be repainted with an anticipation date of 7/17/26.
9.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Metal brackets rusted in shower # 3 Metal brackets will be replaced with an anticipation date of 7/16/26.
10.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Mold on grout in shower # 1, 2, and 3 Mold removed on 5/15/26. Anticipated deep clean date by 7/9/26.
11.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Grout damaged in shower # 1, 2, and 3 Grout cleaned on 5/15/26. Anticipated deep clean date by 7/9/26.
12.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Ceiling panels not secure Ceiling tiles will be resecure with an anticipation date of 7/10/26.

Old Administration Building

Deficiencies under the Required Standards (.100 and .200 series)
3 new deficiencies were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	C Corridor	Culinary Arts	Kitchen	105 CMR 451.200	Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Raw animal food not stored separate from cooked ready-to-eat food (Pf), raw eggs stored above ready-to-eat food. Standard found in 105 CMR 590; FC 3-302.11(A)(1)(b). ** **Corrected On-Site** **
2.	C Corridor	Main Serving Room	Serving Line	105 CMR 451.200	Limitation of Growth of Organisms of Public Health Concern, Temperature and Time Control: Time/temperature control for safety food not held at 41°F or less (Pf), temperature of coleslaw recorded at 50°F. Standard found in 105 CMR 590; FC 3-501.16(A)(2). ** **Corrected On-Site** **
3.	C Corridor	Main Serving Room	Mechanical Warewashing Room	105 CMR 451.200	Numbers and Capacities, Utensils, Temperature Measuring Devices, and Testing Devices: No irreversible registering temperature measuring device readily accessible to measure the surface temperature of the utensil (Pf). Standard found in 105 CMR 590; FC 4-302.13(B). Temperature disc has been ordered with an anticipation date of 7/10/26 until then temperature strips will be used.

Deficiencies under the Recommended Standards (.300 series)
1 new deficiency and 5 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	B Corridor	Offices	105 CMR 451.353*	Interior Maintenance: Ceiling tiles missing and water damaged Ceiling tiles will be replaced with an anticipation date of 8/20/26.
2.	C Corridor		105 CMR 451.353*	Interior Maintenance: Floor tile missing and damaged throughout Floor tiles will be replaced with an anticipated date of 7/17/26
3.	2nd Floor	Parole	105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged in Room # 205 Ceiling tiles will be replaced with an anticipation date of 8/20/26.
4.	2nd Floor	Industries # 224	105 CMR 451.353*	Interior Maintenance: Floor damaged in shipping and receiving room

				Floor will be replaced with an anticipation date of 8/12/26
5.	Basement	Laundry Area	105 CMR 451.350*	Structural Maintenance: Exterior door not rodent and weathertight Weatherstripping will be installed with an anticipation date of 7/10/26
6.	Basement	Property	105 CMR 451.353	Interior Maintenance: Laundry detergent stored in food container Food container removed on 5/15/26.

Central Kitchen

Deficiencies under the Required Standards (.100 and .200 series)
5 new deficiencies and 2 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	Kitchen Area	Handwash Sink	105 CMR 451.200	Plumbing System; Design, Construction and Installation: Insufficient hot water temperature at handwashing sinks (Pf), temperature recorded at 104°F. Standard found in 105 CMR 590; FC 5-202.12(A). Water pump will be installed with an anticipation date of 7/7/26 Until then kitchen staff and inmates will use another handwashing sink.
2.	Kitchen Area	Prep Area	105 CMR 451.200	Protection from Contamination After Receiving, Preventing Food and Ingredient Contamination: Food or food ingredients that have been removed from original packages not labeled with common name of food, unlabeled alfredo sauce in refrigerator near inmate break area. Standard found in 105 CMR 590; FC 3-302.12. ** **Corrected On-Site** **
3.	Kitchen Area	Dry/Baking Storage	105 CMR 451.200*	Protection from Contamination After Receiving; Preventing Contamination from Equipment, Utensils, and Linens: Utensil handle not stored above the food in the container, scoop stored in flour container. Standard found in 105 CMR 590; FC 3-304.12(B). ** **Corrected On-Site** **
4.	Kitchen Area	Refrigerator # 5	105 CMR 451.200	Preventing Contamination from the Premises; Food Storage: Food not stored at least 6" off the ground, juice stored in milk crate on the ground. Standard found in 105 CMR 590; FC 3-305.11(A)(3). ** **Corrected On-Site** **
5.	Kitchen Area	Refrigerator # 5	105 CMR 451.200	Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Raw animal food not stored separate from cooked ready-to-eat food (Pf), raw ground beef stored above cooked chicken. Standard found in 105 CMR 590; FC 3-302.11(A)(1)(b). ** **Corrected On-Site** **
6.	Kitchen Area	2-Compartment Sinks	105 CMR 451.200	Plumbing System; Operation and Maintenance: Plumbing system not maintained in good repair, drain cover not secure. Standard found in 105 CMR 590; FC 5-205.15(B). Drain secured to floor on 5/16/26.

7.	Food Manager's Office	105 CMR 451.200*	Design, Construction, and Installation; Cleanability: Floors not smooth and easily cleanable, floor paint damaged. Standard found in 105 CMR 590; FC 6-201.11. Floor will be repainted with an anticipation date of 7/30/26.

Power Plant

Deficiencies under the Recommended Standards (.300 series)
1 repeat deficiency (indicated by an *) was found during the inspection:

	Area	Regulation	Description of Deficiency
1.	Building Exterior	105 CMR 451.350*	Structural Maintenance: Stairs at entrance damaged and deteriorated Exterior stairs will be replaced/repaired with an anticipation date of 10/30/26.

SECTION 2: Areas Found to be in Compliance

EHRS inspected 220 additional areas of the facility which were found to be in compliance

SECTION 3: Areas EHRS did not Inspect

EHRS did not inspect 3 areas of the facility because they were either in use, locked, or under construction.

	Area	Sub Area # 1	Sub Area # 2	Description of Deficiency
1.	HSU Building	Barton (2nd Floor)	Showers	Unable to Inspect – In Use
2.	Cottages	Algon Building	Shower Room (A & B)	Unable to Inspect – In Use
3.	Vehicle Trap	Maintenance Building		Unable to Inspect – Locked

SECTION 4: Plan of Correction

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 which includes:

1. Specific corrective steps to be taken
2. A timetable for the corrective actions for larger projects
3. The date by which correction will be achieved
4. Any interim measures being implemented to ensure the health and safety of incarcerated individuals and facility staff
5. A signature by the Superintendent or Administrator responsible for the plan. The signed plan should be submitted to my attention, at the address listed above.

SECTION 5: Observations and Recommendations

1. The inmate population was 250 at the time of inspection.

To review the specific regulatory requirements, please visit the Massachusetts Department of Public Health Regulatory and Compliance Unit and read the minimum health and sanitation standards for correctional facilities available in both PDF and RTF formats. For more specific information about the food standards, you can download the merged food code.

An inspection may also include observations of other conditions which could constitute a threat to the health or safety of inmates or employees, including but not limited to the standards set forth by the Department as follows, and report on such pursuant to 451.402(B). You can use these links below to review these standards:

- 105 CMR 205.000: Minimum Standards Governing Medical Records and Conduct of Physical Examinations in Correctional Facilities
- 105 CMR 480.000: Minimum requirements for the Management of Medical or Biological Waste
- 105 CMR 500.000: Good Manufacturing Practices for Food

This inspection report is true and accurate to the best of my knowledge.

Sincerely,

Hannah LeBeau

Hannah LeBeau
Environmental Health Officer, EHRS, BCEH

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Bureau of Climate and Environmental Health
Division of Environmental Health Regulations and Standards
67 Forest Street, Suite # 100
Marlborough, MA 01752
617-624-6000 | mass.gov/dph

Maura T. Healey
Governor

Kimberley Driscoll
Lieutenant Governor

Kiame Mahaniah, MD, MBA
Secretary

Robert Goldstein, MD, PhD
Commissioner

July 10, 2026

Ryan Donlon, Superintendent
MCI Framingham
99 Loring Drive, P.O. Box 9007
Framingham, MA 01701 (electronic copy)

Re: Plan of Correction – MCI Framingham

Dear Superintendent Donlon:

The Massachusetts Department of Public Health, Division of Environmental Regulations and Standards (EHRS) has received your Plan of Correction in response to my inspection conducted on May 14 and 15, 2026. After review, the EHRS finds the plan addresses all the deficiencies noted with the following exceptions:

1. In regards to the issue of overcrowding, the EHRS appreciates the limitations of correctional facilities and the need to accommodate the ever-increasing population; however we remain concerned with the overcrowded conditions; and
2. Please provide a specific corrective action and an estimate date of repair for floor dirty in shower # 1 and 2 in the Upper Level Showers in the New Line.

Thank you for your prompt attention to this matter, should you have any questions please contact me at the address listed above.

Sincerely,

Hannah LeBeau

Hannah LeBeau
Environmental Health Officer, EHRS, BCEH

cc: Michael Beland, EHSO/FSO (electronic copy)

The Commonwealth of Massachusetts
Executive Office of Public Safety & Security
Department of Correction
MCI Framingham
99 Loring Drive, P.O. Box 9007
Framingham, MA 01701
Tel: (508) 532-5100
www.mass.gov/doc

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KIMBERLEY DRISCOLL
Lieutenant Governor

GINA K. KWON
Secretary

SHAWN P. JENKINS
Commissioner

July 14, 2026

Hannah LeBeau, Environmental Health Inspector, EHRS, BCEH
Department of Public Health
Community Sanitation Program
67 Forest Street, Suite #100
Marlborough, MA 01752

Re: MCI Framingham – Plan of Correction

Dear Ms. LeBeau,

Attached please find MCI-Framingham's response to violations noted in your letter dated June 5, 2026.

Please feel free to contact me if you should have any additional questions or concerns.

Sincerely,

Avvani J. Patel
Deputy Superintendent of Operations

RD/pb

cc: Shawn Jenkins, Commissioner, DOC
Brianna Arruda, Director, Policy Development and Compliance Unit, DOC
Michael Beland, EHSO, MCI Framingham
File

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
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Maura T. Healey
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Kiame Mahaniah, MD, MBA
Secretary

Robert Goldstein, MD, PhD
Commissioner

June 5, 2026

Ryan Donlon, Superintendent
MCI Framingham
99 Loring Drive
P.O. Box 9007
Framingham, MA 01704 (electronic copy)

Re: Facility Inspection – MCI Framingham

The Massachusetts Department of Public Health (Department) Division of Environmental Health Regulations and Standards (EHRS) conducted an inspection of MCI Framingham on May 14 and 15, 2026 accompanied by Michael Beland, Environmental Health and Safety Officer, in accordance with Department regulations 105 CMR 451.000: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facilities.

The inspection identified 68 total deficiencies: 37 new deficiencies under the Required Standards (.100 and .200 series), 17 repeat deficiencies under the Required Standards, 5 new deficiencies under the Recommended Standards (.300 series), and 9 repeat deficiencies under the Recommended Standards.

Overview

Section 1 provides details of all deficiencies, including repeat deficiencies, found during the inspection. These are categorized by Required Standards, Recommended Standards, or additional applicable regulatory standards.

Section 2 provides information on areas that EHRS found to be compliant.

Section 3 documents the areas that EHRS did not inspect.

Section 4 provides information on submitting a Plan of Correction for the identified deficiencies.

Section 5 outlines observations and recommendations related to the inspection.

SECTION 1: Health and Safety Deficiencies

Main Building

Deficiencies under the Required Standards (.100 and .200 series)
19 new deficiencies and 5 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	Lobby	Janitor's Closet		105 CMR 451.130*	Plumbing: Plumbing not maintained in good repair, drain cover not secure at slop sink Drain will be secured with an anticipation date of 7/7/26.
2.	Visiting Area	Common Area		105 CMR 451.200*	Food Storage, Preparation and Service: Food storage not in compliance with 105 CMR 590.000, sandwiches observed with use-by date of 5/10/26 in vending machine Expired food removed on 5/15/26.
3.	Smith Food Service # 173			105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, ceiling tiles water damaged. Standard found in 105 CMR 590; FC 6-501.11 Ceiling tiles will be repaired with an anticipation date of 7/7/26.
4.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Walls dirty in shower # 2 Walls cleaned on 5/14/26. Anticipated deep clean date by 7/6/26.
5.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Panel separating from wall in shower # 3 Panel repaired on 5/14/26. Reseal with stripping with an anticipated date of 7/6/26.
6.	ATU East	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Beam dirty outside of showers Beam cleaned on 5/14/26. Anticipated deep clean date by 7/6/26..
7.	ATU East	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Floor dirty in shower # 1 and 2 Floors cleaned on 5/14/26. Anticipated deep clean date by 7/6/26.
8.	ATU West	Cell Block	Lower Level Showers	105 CMR 451.123*	Maintenance: Caulking damaged in shower # 3 Caulking repaired with an anticipation date of 7/7/26.
9.	ATU West	Cell Block	Lower Level Showers	105 CMR 451.123*	Maintenance: Caulking dirty in shower # 1 Caulking cleaned on 5/14/26. Anticipated deep clean date by 7/6/26.

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
10.	New Line	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 2 and 3 Caulking cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
11.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1, 2, and 3 Caulking cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
12.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Floor dirty in shower # 1 and 2 Floors cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
13.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Walls dirty in shower # 2 Walls cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
14.	New Line	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Baseboard dirty in shower # 2 Baseboard cleaned on 5/14/26. Anticipated deep clean date by 7/7/26.
15.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1 Caulking cleaned on 5/14/26. Anticipated deep clean date by 7/8/26.
16.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Dead drain flies observed on ceiling in shower # 1 Shower cleaned on 5/14/26. Anticipated deep clean date by 7/8/26.
17.	BAU	Cell Block	Lower Level Showers	105 CMR 451.123	Maintenance: Drain flies observed in shower # 1 Shower cleaned on 5/14/26. Drain flies removed on 5/14/26. Pest control on site 5/19/26 and will continue to monitor. Anticipated deep clean date by 7/8/26
18.	BAU	Cell Block	Upper Level Showers	105 CMR 451.123	Maintenance: Caulking dirty in shower # 1 and 2 Caulking cleaned on 5/14/26. Anticipated deep clean date by 6/23/26.

Deficiencies under the Recommended Standards (.300 series)

3 new deficiencies and 2 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	Admissions	Fingerprint Room # C148A		105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged Ceiling tiles will be replaced with an anticipation date of 7/8/26.
2.	Admissions	Storage Room # 107A		105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged Ceiling tiles will be replaced with an anticipation date of 7/8/26.
3.	ATU West	Cell Block	Lower Level Janitor's Closet	105 CMR 451.353	Interior Maintenance: Standing water stored in mop bucket Standing water removed from bucket on 5/14/26
4.	New Line	Cell Block	Lower Level Janitor's Closet	105 CMR 451.353	Interior Maintenance: Standing water stored in mop bucket Standing water removed from bucket on 5/14/26
5.	New Line	Cell Block	Cells	105 CMR 451.353	Interior Maintenance: Floor tiles damaged in cell # 152 Floor tiles will be replaced with an anticipation date of 7/8/26.

HSU Building

Deficiencies under the Required Standards (.100 and .200 series)

2 new deficiencies were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	1st Floor	Clinical Area	Staff Bathroom # 3	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, drain cover missing at handwash sink Drain cover will be installed with an anticipation date of 7/7/26
2.	1st Floor	Clinical Area	Inmate Bathroom # 5	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, hot water control leaking at handwash sink Water control will be repaired with an anticipation date of 7/7/26

Deficiencies under the Recommended Standards (.300 series)

1 new deficiency and 1 repeat deficiency (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	1st Floor	Infirmary	All Cells	105 CMR 451.320*	Cell Size: Inadequate floor space in all cells Inmates were removed out of the unit to comply with 105 CMR 451.320 on 5/14/26.
2.	1st Floor	Infirmary	Biohazard Storage Room	105 CMR 451.353	Interior Maintenance: Wall vent dusty

Wall vent cleaned on 5/14/26.

Cottages

Deficiencies under the Required Standards (.100 and .200 series)
8 new deficiencies and 10 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	Laurel Building	Kitchen Area	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, handwash sink leaking from below Handwash sink will be repaired with an anticipation date of 7/9/26.
2.	Laurel Building	Common Area	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, left side bubbler out-of-order in A side hallway Water bubbler will be removed with an anticipation date of 7/10/26.
3.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Grout dirty in shower # Grout cleaned on 5/15/26. Anticipated deep clean date by 7/9/26..
4.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Ceiling tiles missing New ceiling tiles will be installed with an anticipation date of 7/10/26.
5.	Laurel Building	Shower Room (A & B)	105 CMR 451.123	Maintenance: Ceiling tiles not secure Ceiling tiles will be resecure with an anticipation date of 7/10/26.
6.	Laurel Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Grout dirty in shower # 3 Grout cleaned on 5/15/26. Anticipated deep clean date by 7/9/26.
7.	Laurel Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Mold on grout in shower # 2 Mold removed on 5/15/26. Anticipated deep clean date by 7/9/26.
8.	Laurel Building	Shower Room (B & C)	105 CMR 451.123	Maintenance: Floor paint damaged in shower # 3 Floor will be repainted with an anticipation date of 7/17/26.
9.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Metal brackets rusted in shower # 3 Metal brackets will be replaced with an anticipation date of 7/16/26.
10.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Mold on grout in shower # 1, 2, and 3 Mold removed on 5/15/26. Anticipated deep clean date by 7/9/26.
11.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Grout damaged in shower # 1, 2, and 3 Grout cleaned on 5/15/26. Anticipated deep clean date by 7/9/26.
12.	Algon Building	Shower Room (B & C)	105 CMR 451.123*	Maintenance: Ceiling panels not secure Ceiling tiles will be resecure with an anticipation date of 7/10/26.

Old Administration Building

Deficiencies under the Required Standards (.100 and .200 series)
3 new deficiencies were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	C Corridor	Culinary Arts	Kitchen	105 CMR 451.200	Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Raw animal food not stored separate from cooked ready-to-eat food (Pf), raw eggs stored above ready-to-eat food. Standard found in 105 CMR 590; FC 3-302.11(A)(1)(b). **** Corrected On-Site ****
2.	C Corridor	Main Serving Room	Serving Line	105 CMR 451.200	Limitation of Growth of Organisms of Public Health Concern, Temperature and Time Control: Time/temperature control for safety food not held at 41°F or less (Pf), temperature of coleslaw recorded at 50°F. Standard found in 105 CMR 590; FC 3-501.16(A)(2). **** Corrected On-Site ****
3.	C Corridor	Main Serving Room	Mechanical Warewashing Room	105 CMR 451.200	Numbers and Capacities, Utensils, Temperature Measuring Devices, and Testing Devices: No irreversible registering temperature measuring device readily accessible to measure the surface temperature of the utensil (Pf). Standard found in 105 CMR 590; FC 4-302.13(B). Temperature disc has been ordered with an anticipation date of 7/10/26 until then temperature strips will be used.

Deficiencies under the Recommended Standards (.300 series)
1 new deficiency and 5 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	B Corridor	Offices	105 CMR 451.353*	Interior Maintenance: Ceiling tiles missing and water damaged Ceiling tiles will be replaced with an anticipation date of 8/20/26.
2.	C Corridor		105 CMR 451.353*	Interior Maintenance: Floor tile missing and damaged throughout Floor tiles will be replaced with an anticipated date of 7/17/26
3.	2nd Floor	Parole	105 CMR 451.353*	Interior Maintenance: Ceiling tiles water damaged in Room # 205 Ceiling tiles will be replaced with an anticipation date of 8/20/26.
4.	2nd Floor	Industries # 224	105 CMR 451.353*	Interior Maintenance: Floor damaged in shipping and receiving room

				Floor will be replaced with an anticipation date of 8/12/26
5.	Basement	Laundry Area	105 CMR 451.350*	Structural Maintenance: Exterior door not rodent and weathertight Weatherstripping will be installed with an anticipation date of 7/10/26
6.	Basement	Property	105 CMR 451.353	Interior Maintenance: Laundry detergent stored in food container Food container removed on 5/15/26.

Central Kitchen

Deficiencies under the Required Standards (.100 and .200 series)
5 new deficiencies and 2 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	Kitchen Area	Handwash Sink	105 CMR 451.200	Plumbing System; Design, Construction and Installation: Insufficient hot water temperature at handwashing sinks (Pf), temperature recorded at 104°F. Standard found in 105 CMR 590; FC 5-202.12(A). Water pump will be installed with an anticipation date of 7/7/26 Until then kitchen staff and inmates will use another handwashing sink.
2.	Kitchen Area	Prep Area	105 CMR 451.200	Protection from Contamination After Receiving, Preventing Food and Ingredient Contamination: Food or food ingredients that have been removed from original packages not labeled with common name of food, unlabeled alfredo sauce in refrigerator near inmate break area. Standard found in 105 CMR 590; FC 3-302.12. ** **Corrected On-Site** **
3.	Kitchen Area	Dry/Baking Storage	105 CMR 451.200*	Protection from Contamination After Receiving; Preventing Contamination from Equipment, Utensils, and Linens: Utensil handle not stored above the food in the container, scoop stored in flour container. Standard found in 105 CMR 590; FC 3-304.12(B). ** **Corrected On-Site** **
4.	Kitchen Area	Refrigerator # 5	105 CMR 451.200	Preventing Contamination from the Premises; Food Storage: Food not stored at least 6" off the ground, juice stored in milk crate on the ground. Standard found in 105 CMR 590; FC 3-305.11(A)(3). ** **Corrected On-Site** **
5.	Kitchen Area	Refrigerator # 5	105 CMR 451.200	Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Raw animal food not stored separate from cooked ready-to-eat food (Pf), raw ground beef stored above cooked chicken. Standard found in 105 CMR 590; FC 3-302.11(A)(1)(b). ** **Corrected On-Site** **
6.	Kitchen Area	2-Compartment Sinks	105 CMR 451.200	Plumbing System; Operation and Maintenance: Plumbing system not maintained in good repair, drain cover not secure. Standard found in 105 CMR 590; FC 5-205.15(B). Drain secured to floor on 5/16/26.

7.	Food Manager's Office	105 CMR 451.200*	Design, Construction, and Installation; Cleanability: Floors not smooth and easily cleanable, floor paint damaged. Standard found in 105 CMR 590; FC 6-201.11. Floor will be repainted with an anticipation date of 7/30/26.

Power Plant

Deficiencies under the Recommended Standards (.300 series)
1 repeat deficiency (indicated by an *) was found during the inspection:

	Area	Regulation	Description of Deficiency
1.	Building Exterior	105 CMR 451.350*	Structural Maintenance: Stairs at entrance damaged and deteriorated Exterior stairs will be replaced/repaired with an anticipation date of 10/30/26.

SECTION 2: Areas Found to be in Compliance

EHRS inspected 220 additional areas of the facility which were found to be in compliance

SECTION 3: Areas EHRS did not Inspect

EHRS did not inspect 3 areas of the facility because they were either in use, locked, or under construction.

	Area	Sub Area # 1	Sub Area # 2	Description of Deficiency
1.	HSU Building	Barton (2nd Floor)	Showers	Unable to Inspect – In Use
2.	Cottages	Algon Building	Shower Room (A & B)	Unable to Inspect – In Use
3.	Vehicle Trap	Maintenance Building		Unable to Inspect – Locked

SECTION 4: Plan of Correction

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 which includes:

1. Specific corrective steps to be taken
2. A timetable for the corrective actions for larger projects
3. The date by which correction will be achieved
4. Any interim measures being implemented to ensure the health and safety of incarcerated individuals and facility staff
5. A signature by the Superintendent or Administrator responsible for the plan. The signed plan should be submitted to my attention, at the address listed above.

SECTION 5: Observations and Recommendations

1. The inmate population was 250 at the time of inspection.

To review the specific regulatory requirements, please visit the Massachusetts Department of Public Health Regulatory and Compliance Unit and read the minimum health and sanitation standards for correctional facilities available in both PDF and RTF formats. For more specific information about the food standards, you can download the merged food code.

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- 105 CMR 205.000: Minimum Standards Governing Medical Records and Conduct of Physical Examinations in Correctional Facilities
- 105 CMR 480.000: Minimum requirements for the Management of Medical or Biological Waste
- 105 CMR 500.000: Good Manufacturing Practices for Food

This inspection report is true and accurate to the best of my knowledge.

Sincerely,

Hannah LeBeau
Environmental Health Officer, EHRS, BCEH

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August 13, 2026

Ryan Donlon, Superintendent
MCI Framingham
99 Loring Drive, P.O. Box 9007
Framingham, MA 01701 (electronic copy)

Re: Plan of Correction – MCI Framingham

Dear Superintendent Donlon:

The Massachusetts Department of Public Health, Division of Environmental Regulations and Standards (EHRS) has received your Plan of Correction dated July 14, 2026. After review, the EHRS finds the plan addresses all the deficiencies noted.

Thank you for your prompt attention to this matter, should you have any questions please contact me at the address listed above.

Sincerely,

Hannah LeBeau

Hannah LeBeau
Environmental Analyst, EHRS, BCEH

cc: Michael Beland, EHSO/FSO (electronic copy)