

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

September 4, 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)
Faith Menard, Environmental Health and Safety Officer (electronic copy)

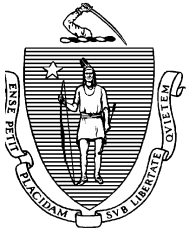
Greetings,

Pursuant to 105 CMR 451.403, please find the inspection report for Western Massachusetts Women's Correctional Center, the Plan of Correction (POC) from the facility and the POC acceptance letter from the Division of Environmental Health Regulations and Standards (EHRS).

Sincerely,

Amy Riordan, MPH
Deputy Director, EHRS, BCEH

Cc: Robert Goldstein, MD, PhD, Commissioner, DPH (electronic copy)
Gina K. Kwon, Secretary, Executive Office of Public Safety and Security (electronic copy)
Lisa Sanders, Director, Chicopee Board of Health (electronic copy)
Brianna Arruda, Director, Policy Development and Compliance Unit (electronic copy)
Nicholas Cocchi, Sheriff (electronic copy)
Colleen Stocks, Superintendent (electronic copy)



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Robert Goldstein, MD, PhD
Commissioner

April 23, 2026

Nicholas Cocchi, Sheriff
Hampden County Sheriff's Office
627 Randall Road
Ludlow, MA 01056 (electronic copy)

Re: Facility Inspection - Western Massachusetts Women's Correctional Center, Chicopee

Dear Sheriff Cocchi:

The Massachusetts Department of Public Health (Department) Division of Environmental Health Regulations and Standards (EHRS) conducted an inspection of the Western Massachusetts Women's Correctional Center on April 17, 2026, accompanied by Lieutenant Faith Menard, Environmental Health and Safety Officer (EHSO), in accordance with Department regulations 105 CMR 451.000: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facilities.

The inspection identified 18 total deficiencies: 7 new deficiencies under the Required Standards (.100 and .200 series), 8 new deficiencies under the Recommended Standards (.300 series), 2 repeat deficiencies under the Recommended Standards, and 1 new deficiency under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety).

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

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

7 new deficiencies were found during the inspection:

Area	Sub Area # 1	Regulation	Description of Deficiency
1. Dry Storage		105 CMR 451.200	Maintenance and Operation Utensils and Temperature and Pressure Measuring Devices; Single service items re-used, spice containers being re-used. Standard found in 105 CMR 590; FC 4-502.13(A)
2. Traulsen Cooler		105 CMR 451.200	Maintenance and Operation Utensils and Temperature and Pressure Measuring Devices; Single service items re-used, plastic sour cream containers being re-used. Standard found in 105 CMR 590; FC 4-502.13(A)
3. Traulsen Cooler		105 CMR 451.200	Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Raw animal food not stored based on cooking temperature(Pf), raw beef stored above raw fish. Standard found in 105 CMR 590; FC 3-302.11(A)(1)(a). *Corrected on Site*
4. Unit 1 Administration		105 CMR 451.110(A)	Hygiene Supplies at Toilet and Handwash Sink: No soap at handwash sink
5. Unit 1A	Upper Showers	105 CMR 451.123	Maintenance: Ceiling vent dusty
6. Unit 2A	Upper Showers	105 CMR 451.123	Maintenance: Ceiling vent dusty
7. Unit 3B	Cells	105 CMR 451.103	Mattresses: Mattress damaged in cell # 28

Deficiencies under the Recommended Standards (.300 series)

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

Area	Sub Area # 1	Regulation	Description of Deficiency
1. Vocational Area	Computer Lab # AB-351	105 CMR 451.353	Interior Maintenance: Ceiling tiles water stained
2. Library Corridor	Janitor's Closet # AA-321	105 CMR 451.353	Interior Maintenance: Ceiling vent dusty
3. Counseling Corridor	Storage Room # AB-331(in room # AB-330)	105 CMR 451.353	Interior Maintenance: Ceiling tiles water stained
4. Program Administration Area		105 CMR 451.353	Interior Maintenance: Ceiling tiles water stained
5. Unit 1B	Cells	105 CMR 451.353*	Interior Maintenance: Floor paint damaged in cell # 13 and 15
6. Unit 1B	Cells	105 CMR 451.353	Interior Maintenance: Floor paint damaged in cell # 1 and 14
7. Unit 3A	Janitor's Closet # HSA-103	105 CMR 451.353	Interior Maintenance: Wet mop stored upside down against wall
8. Unit 3B	Cells	105 CMR 451.353	Interior Maintenance: Floor tile damaged in cell # 7

Deficiencies under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety)

1 new deficiency was found during the inspection:

	Area	Regulation	Description of Deficiency
1.	Office # AA-329	105 CMR 451.402(B)	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. Standard found in 105 CMR 480.425(A).

SECTION 2: Areas Found to be in Compliance

EHRS inspected 235 additional areas of the facility which were found to be in compliance

SECTION 3: Areas EHRS did not Inspect

EHRS inspected all areas of the facility.

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 178 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:

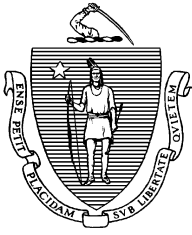
- [105 CMR 205.000: Minimum Standards Governing Medical Records and Conduct of Physical Examinations in Correctional Facilities](#)
- [105 CMR 480.000: Minimum requirements for the Management of Medical or Biological Waste](#)
- [105 CMR 500.000: Good Manufacturing Practices for Food](#)

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

Sincerely,

A handwritten signature in black ink, appearing to read 'Amy Riordan', with a stylized, cursive script.

Amy Riordan, MPH
Deputy Director, EHRS, BCEH



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Robert Goldstein, MD, PhD
Commissioner

June 2, 2026

Nicholas Cocchi, Sheriff
Hampden County Sheriff's Office
627 Randall Road
Ludlow, MA 01056 (electronic copy)

Re: Plan of Correction – Western Massachusetts Women's Correctional Center, Chicopee

Dear Sheriff Cocchi:

The Massachusetts Department of Public Health's, Bureau of Climate and Environmental Health (BCEH), Division of Environmental Health Regulations and Standards (EHRS) has not received your Plan of Correction (POC) in response to my inspection conducted on April 17, 2026. It is recommended that your POC be signed by the Environmental Health and Safety Officer and co-signed by you or the Administrator and emailed to my attention. The POC should include:

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; and
4. Any interim measures being implemented to ensure the health and safety of incarcerated individuals and facility staff.

If you have any questions or would like to discuss this further, please don't hesitate to contact me.

Sincerely,

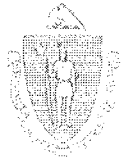
Amy Riordan, MPH
Deputy Director, EHRS, BCEH

Cc: Steven Hughes, Director, EHRS, BCEH
Lieutenant Faith Menard, EHSO

(electronic copy)
(electronic copy)



Commonwealth of Massachusetts
Hampden County Sheriff's Department



Western Massachusetts Regional Women's Correctional Center

Sheriff of Hampshire County
Patrick Cahillane
Sheriff of Worcester County
Lewis Evangelidis

Sheriff of Hampden County
Nicholas Cocchi

Sheriff of Berkshire County
Thomas Bowler
Sheriff of Franklin County
Lori M. Streeter

May 13, 2026

Amy Riordan, MPH
Deputy Director, EHRS, BCEH

RE: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facility

Dear Ms. Amy Riordan:

In response to the Department of Public Health Inspection conducted on November 14, 2025 at the Hampden County Sheriff's Office and Correctional Center, please find our corrective action responses.

We are submitting to you the plans of actions which outline corrective measures in order to achieve compliance.

We are confident that you will find our actions to be satisfactory and in keeping with the highest caliber of service to the Department of Public Health.

We request that you respond, in writing, that our response has been favorably reviewed and accepted by your office.

The Health and Sanitation Inspection was a successful audit and proved beneficial to all of us at the Hampden County Sheriff's Office and Correctional Center.

As in the past, the Department of Public Health continues to be a valuable resource to us.

Sincerely,

Nicholas Cocchi

Sheriff

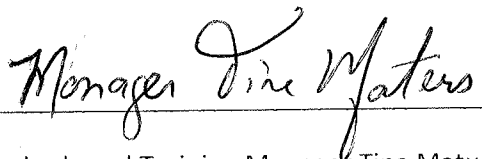
Enclosure

cc: Robert Goldstein, M.D., Commissioner, DPH
Nalina Narain, Director, BEH
Steven Hughes, Director, CSP, BEH
Kaime Mahaniah, M.D. Secretary, Executive Office of Health and Human Services
Shawn Jenkins, Commissioner, DOC
Gina Kwon, Secretary, EOPSS
Timothy Gotovich, Director, Policy Development and Compliance Unit

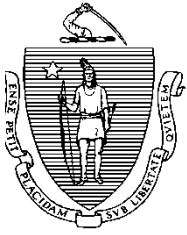
Michael Colbert, Superintendent
Faith Menard, Lieutenant, Armorer, Environmental Health, Fire and Safety Officer
Tina Mateus, Standards and Training Manager
Lisa A. Sanders, Public Health Director, Chicopee Board of Health
Clerk, Massachusetts House of Representatives
Clerk, Massachusetts Senate

Signed  Dated: 5/13/2026
Sheriff Nicholas Cocchi

Signed  Dated: 5/13/2026
Assistant Superintendent Colleen Stocks

Signed  Dated: 5/13/2026
Standards and Training Manager Tina Mateus

Signed  Dated: 5/13/2026
Lieutenant Faith V. Menard, EHFSO



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April 23, 2026

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627 Randall Road
Ludlow, MA 01056 (electronic copy)

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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

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

7 new deficiencies were found during the inspection:

Area	Sub Area # 1	Regulation	Description of Deficiency
1. Dry Storage		105 CMR 451.200	Maintenance and Operation Utensils and Temperature and Pressure Measuring Devices; Single service items re-used, spice containers being re-used. Standard found in 105 CMR 590; FC 4-502.13(A) <i>*4/24/26: Single service containers were discarded, all workers were advised not re-use containers*</i>
2. Traulsen Cooler		105 CMR 451.200	Maintenance and Operation Utensils and Temperature and Pressure Measuring Devices; Single service items re-used, plastic sour cream containers being re-used. Standard found in 105 CMR 590; FC 4-502.13(A) <i>*4/2/26: Single service containers were discarded, all workers were advised not to re-use containers*</i>
3. Traulsen Cooler		105 CMR 451.200	Preventing Contamination after Receiving; Preventing Food and Ingredient Contamination: Raw animal food not stored based on cooking temperature(Pf), raw beef stored above raw fish. Standard found in 105 CMR 590; FC 3-302.11(A)(1)(a). *Corrected on Site** All workers were reminded on Serv Safe protocols*
4. Unit 1 Administration		105 CMR 451.110(A)	Hygiene Supplies at Toilet and Handwash Sink: No soap at handwash sink <i>*4/23/26: Handsoap replaced in dispenser*</i>
5. Unit 1A	Upper Showers	105 CMR 451.123	Maintenance: Ceiling vent dusty <i>*4/23/26: Ceiling vent was cleared of dust*</i>
6. Unit 2A	Upper Showers	105 CMR 451.123	Maintenance: Ceiling vent dusty <i>*4/23/26: Ceiling vent was cleared of dust*</i>
7. Unit 3B	Cells	105 CMR 451.103	Mattresses: Mattress damaged in cell # 28 <i>*4/23/26: Damaged mattress was replaced with a new mattress*</i>

Deficiencies under the Recommended Standards (.300 series)

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

Area	Sub Area # 1	Regulation	Description of Deficiency
1. Vocational Area	Computer Lab # AB-351	105 CMR 451.353	Interior Maintenance: Ceiling tiles water stained <i>*5/8/26: Ceiling tiles were replaced *</i>
2. Library Corridor	Janitor's Closet # AA-321	105 CMR 451.353	Interior Maintenance: Ceiling vent dusty <i>*4/23/26: Ceiling vent was cleared of dust*</i>
3. Counseling Corridor	Storage Room # AB-331(in room # AB-330)	105 CMR 451.353	Interior Maintenance: Ceiling tiles water stained <i>*5/8/26: Ceiling tiles were replaced*</i>

4.	Program Administration Area		105 CMR 451.353	Interior Maintenance: Ceiling tiles water stained <i>*5/8/26: Ceiling tiles were replaced*</i>
5.	Unit 1B	Cells	105 CMR 451.353*	Interior Maintenance: Floor paint damaged in cell # 13 and 15 <i>*Floors are to be repaired once emptied or by June 1st, whichever comes first*</i>
6.	Unit 1B	Cells	105 CMR 451.353	Interior Maintenance: Floor paint damaged in cell # 1 and 14 <i>*Floors are to be replaced once emptied or by June 1st, whichever comes first*</i>
7.	Unit 3A	Janitor's Closet # HSA-103	105 CMR 451.353	Interior Maintenance: Wet mop stored upside down against wall <i>4/23/26: Worker addressed and mop was hung correctly*</i>
8.	Unit 3B	Cells	105 CMR 451.353	Interior Maintenance: Floor tile damaged in cell # 7 <i>*Floor tiles are to be repaired/replaced by June 1st*</i>

Deficiencies under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety)

1 new deficiency was found during the inspection:

	Area	Regulation	Description of Deficiency
1.	Office # AA-329	105 CMR 451.402(B)	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. Standard found in 105 CMR 480.425(A). <i>*5/01/26: Stericycle form for 3/11/26 was received and scanned to DPH Director Amy Riordan for review of compliance*</i>

SECTION 2: Areas Found to be in Compliance

EHRS inspected 235 additional areas of the facility which were found to be in compliance

SECTION 3: Areas EHRS did not Inspect

EHRS inspected all areas of the facility.

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:

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SECTION 5: Observations and Recommendations

1. The inmate population was 178 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](#).

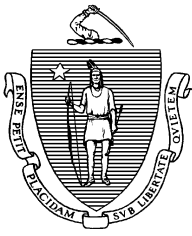
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- [105 CMR 205.000: Minimum Standards Governing Medical Records and Conduct of Physical Examinations in Correctional Facilities](#)
- [105 CMR 480.000: Minimum requirements for the Management of Medical or Biological Waste](#)
- [105 CMR 500.000: Good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

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

Sincerely,

Amy Riordan, MPH
Deputy Director, EHRS, BCEH



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June 24, 2026

Nicholas Cocchi, Sheriff
Hampden County Sheriff's Office
627 Randall Road
Ludlow, MA 01056 (electronic copy)

Re: Plan of Correction - Western Massachusetts Women's Correctional Center, Chicopee

Dear Sheriff Cocchi,

The Massachusetts Department of Public Health, Division of Environmental Health Regulations and Standards (EHRS) has received your Plan of Correction in response to my inspection on April 17, 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,

A handwritten signature in black ink, appearing to read "ARiordan".

Amy Riordan, MPH
Deputy Director, EHRS, BCEH

cc: Colleen Stocks, Superintendent
Lieutenant Faith Menard, EHSO

(electronic copy)
(electronic copy)