The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
100 Cambridge Street, 19th floor, Boston, MA 02114-2509
(617) 624-6000 | mass.gov/DPH

Maura T. Healey
Governor

Kimberley Driscoll
Lieutenant Governor

Kiame Mahaniah, MD, MBA
Secretary

Robert Goldstein, MD, PhD
Commissioner

October 30, 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)
	Daniel Alves, Environmental Health and Safety Officer	(electronic copy)

Greetings,

Pursuant to 105 CMR 451.403, please find the inspection report for Pondville 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,

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)
	Betsey Fijol, Executive Assistant, Norfolk Board of Health	(electronic copy)
	Brianna Arruda, Director, Policy Development and Compliance Unit	(electronic copy)
	Joy Gallant, Superintendent	(electronic copy)

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
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Commissioner

September 21, 2026

Joy Gallant, Superintendent
Pondville Correctional Center
P.O. Box 146
Norfolk, MA 02056 electronic copy)

Re: Facility Inspection – Pondville Correctional Center, Norfolk

Dear Superintendent Gallant:

The Massachusetts Department of Public Health (Department) Division of Environmental Health Regulations and Standards (EHRS) staff, Hannah LeBeau and Ellie Kim, conducted an inspection of Pondville Correctional Center on September 10, 2026, accompanied by Daniel Alves, 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.

This report identifies the number of new and repeat deficiencies which remain uncorrected since the previous inspection. The inspection identified 27 total deficiencies: 12 new deficiencies under the Required Standards (.100 and .200 series), 6 repeat deficiencies under the Required Standards, 6 new deficiencies under the Recommended Standards (.300 series), 1 repeat deficiency under the Recommended Standards, 1 new deficiency under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety), and 1 repeat deficiency under 105 CMR 451.402(B).

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)

12 new deficiencies and 6 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	Food Service	Mechanical Warewashing Area		105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, wall around warewash machine dirty. Standard found in 105 CMR 590; FC 6-501.12(A).
2.	Food Service	Mechanical Warewashing Area		105 CMR 451.200	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, backsplash trim damaged near warewash machine. Standard found in 105 CMR 590; FC 6-501.11.
3.	Food Service	Kitchen		105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, floor dirty behind ovens. Standard found in 105 CMR 590; FC 6-501.12(A).
4.	Food Service	Kitchen		105 CMR 451.200	Maintenance and Operation Utensils and Temperature and Pressure Measuring Devices; Single service items re-used, reused spice containers for different spices than indicated on label. Standard found in 105 CMR 590; FC 4-502.13(A)
5.	Food Service	Office		105 CMR 590.011(A)(2)	Additional Requirements: Anti-choking Procedures in Food Service Establishments: No employee present that is trained in manual procedures approved by the Department to remove food lodged in a person's throat. Standard found in 105 CMR 590.
6.	Control	Staff Break Room		105 CMR 451.200	Food Storage, Preparation and Service: Food storage not in compliance with 105 CMR 590.000, gaskets damaged at freestanding refrigerator
7.	Control	Staff Break Room		105 CMR 451.200	Food Storage, Preparation and Service: Food storage not in compliance with 105 CMR 590.000, interior of freezer dirty
8.	Housing Units	1-1	Bathroom	105 CMR 451.123	Maintenance: Ceiling damaged in shower # 1
9.	Housing Units	1-3	Bathroom	105 CMR 451.123*	Maintenance: Floor dirty in shower
10.	Housing Units	1-3	Bathroom	105 CMR 451.123*	Maintenance: Walls dirty in shower

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
11.	Housing Units	2-2	Bathroom	105 CMR 451.123*	Maintenance: Floor damaged outside of showers
12.	Housing Units	2-2	Bathroom	105 CMR 451.123	Maintenance: Ceiling paint damaged above showers
13.	Housing Units	2-2	Bathroom	105 CMR 451.130	Hot Water: Shower water temperature 125°F at shower # 2
14.	Housing Units	2-2	Bathroom	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, showerhead leaking at shower # 1
15.	Housing Units	2-3	Bathroom	105 CMR 451.123*	Maintenance: Floor damaged outside of showers
16.	Housing Units	2-3	Bathroom	105 CMR 451.123	Maintenance: Curtain dirty at shower # 3 and 4
17.	Housing Units	2-4	Bathroom	105 CMR 451.126	Hot Water for Bathing and Hygiene: Hot water temperature 136°F at handwash sink # 1

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

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	H.S.U.	Medical Records Room		105 CMR 451.353	Interior Maintenance: Upholstery damaged on exam table
2.	Housing Units			105 CMR 451.320*	Cell Size: Inadequate floor space in all cells
3.	Housing Units	1-1	Cells	105 CMR 451.353	Interior Maintenance: Wall paint damaged in cell # 101 and 105
4.	Housing Units	1-1	Cells	105 CMR 451.353	Interior Maintenance: Window shade damaged in cell # 123
5.	Housing Units	1-1	Laundry	105 CMR 451.353	Interior Maintenance: Dryer # 2 out-of-order
6.	Housing Units	2-4	Cells	105 CMR 451.353	Interior Maintenance: Window shade damaged in cell # 241

Deficiencies under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety)
1 new deficiency and 1 repeat deficiency (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	H.S.U.	Nurse's Office (Medical Waste Log Book)	105 CMR 451.402(B)*	Shipping Papers: Generator was not maintaining copy of shipping papers with record-keeping log for at least 375 days. Standard found in 105 CMR 480.400(C).
2.	H.S.U.	Nurse's Office (Medical Waste Log Book)	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 53 additional areas of the facility which were found to be in compliance.

SECTION 3: Areas EHRS did not inspect

EHRS did not inspect 1 area of the facility because they were either in use, locked, or under construction.

	Area	Sub Area # 1	Sub Area # 2	Description of Deficiency
1.	Housing Units	1-2	Bathroom	Unable to Inspect Showers - Under Construction

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 126 at the time of inspection.
2. The EHRS recommends numbering all showers throughout the institution. This will assist the EHRS and DOC staff to better recognize where issues exist.

To review the specific regulatory requirements please visit our website at www.mass.gov/dph/dcs and click on "Correctional Facilities" 105 CMR 451.000 available in both PDF and RTF formats. For more specific information about the food standards, you can download the merged food code, which can be found here.

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 Analyst, EHRS, BCEH

The Commonwealth of Massachusetts
Executive Office of Public Safety & Security
Department of Correction
Pondville Correctional Center
1 Industries Drive
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MAURA T. HEALEY
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Commissioner

September 30, 2026

Hannah LeBeau

Environmental Health Inspector, EHRS, BCEH

Department of Public Health

Division of Environmental Health Regulations and Standards

67 Forest Street, Suite # 100

Marlborough, MA 01752

Dear Ms. LeBeau:

I am in receipt of the Department of Public Health inspection report that you provided in relation to the inspection of Pondville Correctional Center that was conducted on September 10, 2026. Your report has cited deficiencies that require a plan of corrective action within 10 days from receipt of your report.

Please be advised that I have attached Pondville Correctional Center's responses to the deficiencies noted within your report. I understand that continued monitoring and corrective action will help prevent future violations.

If you should have any questions or concerns after reviewing our response, please do not hesitate to contact me.

Sincerely,

Joy Gallant,

Joy Gallant

Superintendent

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September 21, 2026

Joy Gallant, Superintendent
Pondville Correctional Center
P.O. Box 146
Norfolk, MA 02056 electronic copy)

Re: Facility Inspection – Pondville Correctional Center, Norfolk

Dear Superintendent Gallant:

The Massachusetts Department of Public Health (Department) Division of Environmental Health Regulations and Standards (EHRS) staff, Hannah LeBeau and Ellie Kim, conducted an inspection of Pondville Correctional Center on September 10, 2026, accompanied by Daniel Alves, 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.

This report identifies the number of new and repeat deficiencies which remain uncorrected since the previous inspection. The inspection identified 27 total deficiencies: 12 new deficiencies under the Required Standards (.100 and .200 series), 6 repeat deficiencies under the Required Standards, 6 new deficiencies under the Recommended Standards (.300 series), 1 repeat deficiency under the Recommended Standards, 1 new deficiency under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety), and 1 repeat deficiency under 105 CMR 451.402(B).

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)
12 new deficiencies and 6 repeat deficiencies (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	Food Service	Mechanical Warewashing Area		105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, wall around warewash machine dirty. Standard found in 105 CMR 590; FC 6-501.12(A). Facility Response: Walls were cleaned by Kitchen staff on 9-24-26.
2.	Food Service	Mechanical Warewashing Area		105 CMR 451.200	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, backsplash trim damaged near warewash machine. Standard found in 105 CMR 590; FC 6-501.11. Facility Response: Backsplash was replaced by Maintenance staff on 9-21-26.
3.	Food Service	Kitchen		105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, floor dirty behind ovens. Standard found in 105 CMR 590; FC 6-501.12(A). Facility Response: Floor was cleaned by Kitchen staff on 9-12-26.
4.	Food Service	Kitchen		105 CMR 451.200	Maintenance and Operation Utensils and Temperature and Pressure Measuring Devices; Single service items re-used, reused spice containers for different spices than indicated on label. Standard found in 105 CMR 590; FC 4-502.13(A) Facility Response: All spice containers were properly labeled by Kitchen staff on 9-11-26.
5.	Food Service	Office		105 CMR 590.011(A)(2)	Additional Requirements: Anti-choking Procedures in Food Service Establishments: No employee present that is trained in manual procedures approved by the Department to remove food lodged in a person's throat. Standard found in 105 CMR 590. Facility Response: Facility posts staff who are trained and certified in the Heimlich Maneuver at all three meals 7

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
					days a week. Additionally, this facility has 24-hour medical staff who are trained and will respond to any incident of choking.
6.	Control	Staff Break Room		105 CMR 451.200	Food Storage, Preparation and Service: Food storage not in compliance with 105 CMR 590.000, gaskets damaged at freestanding refrigerator Facility Response: Replacement gaskets have been ordered by Maintenance staff. Projected completion date of 10-9-26.
7.	Control	Staff Break Room		105 CMR 451.200	Food Storage, Preparation and Service: Food storage not in compliance with 105 CMR 590.000, interior of freezer dirty Facility Response: Freezer was cleaned by House Manager staff on 9-24-26.
8.	Housing Units	1-1	Bathroom	105 CMR 451.123	Maintenance: Ceiling damaged in shower # 1 Facility Response: Ceiling was repaired by Maintenance staff on 9-22-26.
9.	Housing Units	1-3	Bathroom	105 CMR 451.123*	Maintenance: Floor dirty in shower Facility Response: Floors outside of shower to be repainted by Maintenance staff with a projected completion date of 10-15-26.
10.	Housing Units	1-3	Bathroom	105 CMR 451.123*	Maintenance: Walls dirty in shower Facility Response: Walls were cleaned by House Manager staff on 9-12-26.
11.	Housing Units	2-2	Bathroom	105 CMR 451.123*	Maintenance: Floor damaged outside of showers Facility Response: Floors outside of shower to be repainted by Maintenance staff with a projected completion date of 10-15-26.
12.	Housing Units	2-2	Bathroom	105 CMR 451.123	Maintenance: Ceiling paint damaged above showers Facility Response: Ceiling to be repainted by Maintenance staff with a projected completion date of 10-1-26.
13.	Housing Units	2-2	Bathroom	105 CMR 451.130	Hot Water: Shower water temperature 125°F at shower # 2 Facility Response: Water temperatures were adjusted by Maintenance staff on 9-11-26 and are now in compliance.
14.	Housing Units	2-2	Bathroom	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, showerhead leaking at shower # 1

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
					Facility Response: Shower head was reattached by Maintenance staff on 9-21-26 and is now operational.
15.	Housing Units	2-3	Bathroom	105 CMR 451.123*	Maintenance: Floor damaged outside of showers Facility Response: Floors outside of shower to be repainted by Maintenance staff with a projected completion date of 10-15-26.
16.	Housing Units	2-3	Bathroom	105 CMR 451.123	Maintenance: Curtain dirty at shower # 3 and 4 Facility Response: New shower curtains were purchased by House Manager. Projected delivery date of 10-1-26. All Shower curtains will be replaced when the order is received.
17.	Housing Units	2-4	Bathroom	105 CMR 451.126	Hot Water for Bathing and Hygiene: Hot water temperature 136°F at handwash sink # 1 Facility Response: Water temperatures was adjusted by Maintenance staff on 9-11-26 and are now in compliance.

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

	Area	Sub Area # 1	Sub Area # 2	Regulation	Description of Deficiency
1.	H.S.U.	Medical Records Room		105 CMR 451.353	Interior Maintenance: Upholstery damaged on exam table Facility Response: Medical Vendor VitalCore to purchase new exam table with projected completion date of 10-15-26.
2.	Housing Units			105 CMR 451.320*	Cell Size: Inadequate floor space in all cells Facility Response: Due to the physical layout of the facility, and classification concerns, the facility is unable to comply with this recommended (.300 series) standard.
3.	Housing Units	1-1	Cells	105 CMR 451.353	Interior Maintenance: Wall paint damaged in cell # 101 and 105 Facility Response: Walls were repainted by Maintenance staff on 9-24-26.
4.	Housing Units	1-1	Cells	105 CMR 451.353	Interior Maintenance: Window shade damaged in cell # 123 Facility Response: Window shade was replaced by Maintenance staff on 9-24-26.

5.	Housing Units	1-1	Laundry	105 CMR 451.353	Interior Maintenance: Dryer # 2 out-of-order Facility Response: Outside vendor to repair the dryer that is out of order. Projected completion date of 10-1-26.
6.	Housing Units	2-4	Cells	105 CMR 451.353	Interior Maintenance: Window shade damaged in cell # 241 Facility Response: Window shade was replaced by Maintenance staff on 9-21-26.

Deficiencies under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety)
1 new deficiency and 1 repeat deficiency (indicated by an *) were found during the inspection:

	Area	Sub Area # 1	Regulation	Description of Deficiency
1.	H.S.U.	Nurse's Office (Medical Waste Log Book)	105 CMR 451.402(B)*	Shipping Papers: Generator was not maintaining copy of shipping papers with record-keeping log for at least 375 days. Standard found in 105 CMR 480.400(C). Facility Response: The record keeping log has been updated to reflect tracking form and shipping papers from July 17th 2024 through August 2026. The binder was updated by Nursing staff on 9-10-26.
2.	H.S.U.	Nurse's Office (Medical Waste Log Book)	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). Facility Response: The record keeping log has been updated to reflect tracking form and shipping papers from July 17th 2024 through August 2026. The binder was updated by Nursing staff on 9-10-26.

SECTION 2: Areas Found to be in Compliance

EHRS inspected 53 additional areas of the facility which were found to be in compliance.

SECTION 3: Areas EHRS did not inspect

EHRS did not inspect 1 area of the facility because they were either in use, locked, or under construction.

	Area	Sub Area # 1	Sub Area # 2	Description of Deficiency
1.	Housing Units	1-2	Bathroom	Unable to Inspect Showers - Under Construction

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 126 at the time of inspection.
2. The EHRS recommends numbering all showers throughout the institution. This will assist the EHRS and DOC staff to better recognize where issues exist.

To review the specific regulatory requirements please visit our website at www.mass.gov/dph/dcs and click on "Correctional Facilities" 105 CMR 451.000 available in both PDF and RTF formats. For more specific information about the food standards, you can download the merged food code, which can be found here.

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
Environmental Analyst, EHRS, BCEH

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October 15, 2026

Joy Gallant, Superintendent
Pondville Correctional Center
P.O. Box 146
Norfolk, MA 02056 (electronic copy)

Re: Plan of Correction – Pondville Correctional Center, Norfolk

Dear Superintendent Gallant:

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 September 10, 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 estimated date of completion for single-service items re-used in the Kitchen and floor dirty in shower in the 1-3 Bathroom.

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: Daniel Alves, EHSO/FSO (electronic copy)

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Executive Office of Public Safety & Security
Department of Correction
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MAURA T. HEALEY
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SHAWN P. JENKINS
Commissioner

October 16, 2026

Hannah LeBeau
Environmental Health Inspector, EHRS, BCEH
Department of Public Health
Division of Environmental Health Regulations and Standards
67 Forest Street, Suite # 100
Marlborough, MA 01752

Dear Ms. LeBeau:
In response to your letter dated October 15, 2026, the following corrective action has been taken to rectify the deficiencies noted in the report:

> Please provide a specific corrective action and an estimated date of completion for single-service items re-used in the Kitchen and floor dirty in shower in the 1-3 Bathroom.
>
> Facility Response: The single-service items re-used in the kitchen were removed and discarded by kitchen staff on 9-10-26.
>
> Facility Response: The dirty floor in the 1-3 bathroom shower was cleaned by Warehouse Manager on 9-11-26.

I have also updated the letter dated October 15, 2026 to include these responses to the deficiencies that were noted. If you should have any questions or concerns after reviewing our response, please do not hesitate to contact me.
Sincerely,
Joy Gallant,
Superintendent

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October 15, 2026

Joy Gallant, Superintendent
Pondville Correctional Center
P.O. Box 146
Norfolk, MA 02056 (electronic copy)

Re: Plan of Correction – Pondville Correctional Center, Norfolk

Dear Superintendent Gallant:

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 September 10, 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 estimated date of completion for single-service items re-used in the Kitchen and floor dirty in shower in the 1-3 Bathroom.
   Facility Response: The single-service items re-used in the kitchen were removed and discarded by kitchen staff on 9-10-26.
   Facility Response: The dirty floor in the 1-3 bathroom shower was cleaned by Warehouse Manager on 9-11-26.

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
Environmental Analyst, EHRS, BCEH

cc: Daniel Alves, EHSO/FSO (electronic copy)

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Secretary

Robert Goldstein, MD, PhD
Commissioner

October 23, 2026

Joy Gallant, Superintendent
Pondville Correctional Center
P.O. Box 146
Norfolk, MA 02056 (electronic copy)

Re: Plan of Correction – Pondville Correctional Center, Norfolk

Dear Superintendent Gallant:

The Massachusetts Department of Public Health, Division of Environmental Regulations and Standards (EHRS) has received your Plan of Correction dated October 16, 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: Daniel Alves, EHSO/FSO (electronic copy)