

# MAURA T. HEALEY Governor KIMBERLEY DRISCOLL Lieutenant Governor

# The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

Bureau of Climate and Environmental Health

Bureau of Climate and Environmental Health Division of Environmental Health Regulations and Standards

67 Forest Street, Suite # 100 Marlborough, MA 01752 Phone: 617-624-6000

KATHLEEN E. WALSH Secretary

ROBERT GOLDSTEIN, MD, PhD
Commissioner

Tel: 617-624-6000 www.mass.gov/dph

May 21, 2025

To: Shawn Jenkins, Commissioner, Department of Corrections
Kathleen E. Walsh, Secretary, Executive Office of Health and Human Services
Clerk, Massachusetts House of Representatives
Clerk, Massachusetts Senate
Sean Gallagher, Environmental Health and Safety Officer

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# Greetings,

Pursuant to 105 CMR 451.403, please find the inspection report for Essex County Correctional Alternative Center, Lawrence, the Plan of Correction (POC) Reminder letters, the POCs from the facility and the POC acceptance letter from the Division of Environmental Health Regulations and Standards (EHRS).

Amy Riordan, MPH Senior Advisor, EHRS, BCEH

Cc: Robert Goldstein, MD, PhD, Commissioner, DPH
Terrence Reidy, Secretary, Executive Office of Public Safety and Security
Pascual Ruiz, Director, Lawrence Board of Health
Brianna Arruda, Director, Policy Development and Compliance Unit
Heidi Mora, Superintendent

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# The Commonwealth of Massachusetts Executive Office of Health and Human Services Department of Public Health Bureau of Climate and Environmental Health

Bureau of Climate and Environmental Health
Division of Environmental Health Regulations and Standards

67 Forest Street Suite # 100 Marlborough, MA 01752 Phone: 617-624-5757

KATHLEEN E. WALSH Secretary

ROBERT GOLDSTEIN, MD, PhD Commissioner

> Tel: 617-624-6000 www.mass.gov/dph

March 10, 2025

KIMBERLEY L. DRISCOLL Lieutenant Governor

MAURA T. HEALEY

Governor

Kevin F. Coppinger, Sheriff
Essex County Sheriff's Department Headquarters
20 Manning Avenue
Middleton, MA 01929 (electronic copy)

Re: Facility Inspection - Essex County Correctional Alternative Center, Lawrence

# Dear Sheriff Coppinger:

The Massachusetts Department of Public Health (Department) Division of Environmental Health Regulations and Standards (EHRS) conducted an inspection of the Essex County Correctional Alternative Center on February 25, 2025 accompanied by Sean Gallagher, Director of Operations and Captain Jim Comeau, in accordance with Department regulations 105 CMR 451.000: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facilities.

The inspection identified 74 total deficiencies: 35 deficiencies under the Required Standards (.100 and .200 series), 16 repeat deficiencies under the Required Standards, 12 deficiencies under the Recommended Standards (.300 series), 7 repeat deficiencies under the Recommended Standards, and 4 deficiencies 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**

# **Main Building**

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

33 new deficiencies and 15 repeat deficiencies (indicated by an \*) were found during the inspection:

1.	Control	Bathroom (near Shift Commander's Office)	105 CMR 451.123	Maintenance: Radiator rusted
2.	Control	Shift Commander's Office	105 CMR 451.200	Food Storage, Preparation and Service: Food preparation not in compliance with 105 CMR 590.000, interior of microwave oven dirty
3.	Lobby	Staff Break Room	105 CMR 451.200	Food Storage, Preparation and Service: Food preparation not in compliance with 105 CMR 590.000, interior of microwave oven dirty
4.	South Side 1st Floor	Female Staff Bathroom	105 CMR 451.123*	Maintenance: Ceiling tiles water stained
5.	South Side 1st Floor	Female Staff Bathroom	105 CMR 451.126	Hot Water for Bathing and Hygiene: Hot water temperature 61°F at handwash sink
6.	South Side 1st Floor	Male Staff Bathroom	105 CMR 451.123*	Maintenance: Radiator rusted
7.	South Side 2nd Floor	Room # S202	105 CMR 451.141	Screens: Screen damaged at both windows
8.	South Side 2nd Floor	Room # S206	105 CMR 451.141	Screens: Screen damaged at one window
9.	South Side 2nd Floor	Room # S206	105 CMR 451.141	Screens: Screen missing at one window
10.	South Side 2nd Floor	Room # S207	105 CMR 451.102	Pillows and Linens: Pillow damaged on bed # 1
11.	South Side 2nd Floor	Bathroom	105 CMR 451.126	Hot Water for Bathing and Hygiene: Hot water temperature 95°F at handwash sink
12.	South Side 2nd Floor	Bathroom	105 CMR 451.123	Maintenance: Strong urine odor present
13.	South Side 2nd Floor	Bathroom	105 CMR 451.123	Maintenance: Light shield(s) missing
14.	South Side 3rd Floor	Inmate Bathroom	105 CMR 451.126	Hot Water for Bathing and Hygiene: Hot water temperature 100°F at handwash sink
15.	North Side 1st Floor	Dining Room	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, sink leaking
16.	North Side 1st Floor	Dining Room	105 CMR 451.200	Food Storage, Preparation and Service: Food preparation not in compliance with 105 CMR 590.000, interior of microwave oven dirty
17.	North Side 1st Floor	Tray Room	105 CMR 451.200	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, sprayer head moldy at sink. Standard found in 105 CMR 590; FC 6-501.12(A).
18.	Kitchen	Refrigerators	105 CMR 451.200*	Maintenance and Operation, Equipment: Equipment components not maintained in a state of good repair,

19. Kitchen  Dry Storage Closet  Dry Storage C				mold on gaskets in refrigerator # 3. Standard found in 105 CMR 590; FC 4-501.11(B).
Structure, Attachments, and Fixtures Methods: Facility not in good repair, ceiling leaking in freezer. Standard found in 105 CMR 590; FC 6-501.11.	19. Kitchen	Dry Storage Closet	105 CMR 451.200	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, wall fan dusty. Standard found in 105
Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary. Standard found in 105 CMR 590; FC 6-501.12(A).  22. Kitchen  2-Compartment Sink (Left)  2-Compartment Sink (Left)  2-Compartment Sink (Right)  3-Compartment Sink (Right)  4-Compartment Sink (Right)  5-Compartment Sink (Right)  6-Sol.12(A).  6-Sol	20. Kitchen	Main Area	105 CMR 451.200*	Methods: Facility not in good repair, ceiling leaking in freezer. Standard
Cleft   Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, wall fan dusty and doesn' open completely. Standard found in 10 CMR 590; FC 6-501.12(A).	21. Kitchen	Main Area	105 CMR 451.200*	Methods: Facility not cleaned as often as necessary, excessive ice build-up on floor in freezer. Standard found in 105
(Right)  (Ri	22. Kitchen		105 CMR 451.200	Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, wall fan dusty and doesn't open completely. Standard found in 105
25. North Side 2nd Floor Room # N202 105 CMR 451.141 Screens: Screen damaged 26. North Side 2nd Floor Room # N203 105 CMR 451.141 Screens: Screen missing 27. North Side 2nd Floor Room # N204 105 CMR 451.141 Screens: Screen missing 28. North Side 2nd Floor Room # N209 105 CMR 451.141 Screens: Screen missing 29. North Side 2nd Floor Room # N210 (Left) 105 CMR 451.141 Screens: Screen missing 30. North Side 2nd Floor Room # N210 (Right) 105 CMR 451.141 Screens: Screen missing 31. North Side 2nd Floor Room # N210 (Right) 105 CMR 451.141 Screens: Screen missing 32. North Side 3rd Floor Room # N301 105 CMR 451.141 Screens: Screen damaged 33. North Side 3rd Floor Room # N301 105 CMR 451.103 Mattresses: Mattress damaged 34. Maintenance Cage Maintenance Storage 105 CMR 451.103 Mattresses: Mattress damaged on bed 2 34. Maintenance Cage Maintenance Storage 105 CMR 451.141 Screens: Screen missing 35. Main Bathroom Toilets and Handwash Sinks 105 CMR 451.123 Maintenance: Wall missing under sink Sinks 37. Main Bathroom Main Shower 105 CMR 451.123 Maintenance: Walls dirty in shower # 2 5, 7, 8, 9, and 10 38. Main Bathroom Main Shower 105 CMR 451.123 Maintenance: Walls dirty in shower # 1	23. Kitchen		105 CMR 451.200	Methods: Facility not cleaned as often as necessary, water sprayer moldy at sink. Standard found in 105 CMR 590; FC
26. North Side 2nd FloorRoom # N203105 CMR 451.141Screens: Screen missing27. North Side 2nd FloorRoom # N204105 CMR 451.141Screens: Screen damaged28. North Side 2nd FloorRoom # N209105 CMR 451.141Screens: Screen missing29. North Side 2nd FloorRoom # N210 (Left)105 CMR 451.141Screens: Screen missing30. North Side 2nd FloorRoom # N210 (Right)105 CMR 451.141*Screens: Screen missing31. North Side 2nd FloorRoom # N210 (Right)105 CMR 451.141Screens: Screen damaged32. North Side 3rd FloorRoom # N301105 CMR 451.103Mattresses: Mattress damaged33. North Side 3rd FloorRoom # N307105 CMR 451.103Mattresses: Mattress damaged on bed34. Maintenance CageMaintenance Storage105 CMR 451.141Screens: Screen missing35. Main BathroomToilets and Handwash Sinks105 CMR 451.130Plumbing: Plumbing not maintained in good repair, sink # 9 loose36. Main BathroomToilets and Handwash Sinks105 CMR 451.123Maintenance: Wall missing under sink37. Main BathroomMain Shower105 CMR 451.123*Maintenance: Walls dirty in shower # 2 5, 7, 8, 9, and 1038. Main BathroomMain Shower105 CMR 451.123Maintenance: Walls dirty in shower # 1	24. North Side 2nd Floor	Inmate Bathroom	105 CMR 451.123*	Maintenance: Ceiling dirty throughout
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<u> </u>	38. Main Bathroom	Main Shower	105 CMR 451.123	Maintenance: Walls dirty in shower # 1
and the state of t	39. Main Bathroom	Main Shower	105 CMR 451.123*	Maintenance: Ceiling dirty throughout

40. Main Bathroom	Main Shower	105 CMR 451.123	Maintenance: Ceiling vent rusted
41. Main Bathroom	Slop Sink	105 CMR 451.130*	Plumbing: Plumbing not maintained in good repair, not hot water supplied to slop sink
42. Print Shop (off of Gym)	Toilets and Handwash Sinks	105 CMR 451.123	Maintenance: Ceiling vent dusty
43. Officer's Weight Room	Male Staff Bathroom	105 CMR 451.123	Maintenance: Baseboard damaged near showers

# Deficiencies under the Recommended Standards (.300 series)

11 new deficiencies and 7 repeat deficiencies (indicated by an \*) were found during the inspection:

1. South Side 2nd Floor	Room # S209	105 CMR 451.350	Structural Maintenance: Wall damaged
2. South Side 2nd Floor	Room # S211	105 CMR 451.350*	Structural Maintenance: Ceiling damaged
3. South Side 3rd Floor	Room # S303	105 CMR 451.353	Interior Maintenance: Floor tile damaged
4. South Side 3rd Floor	Room # S304	105 CMR 451.353	Interior Maintenance: Missing outlet cover
			by door
5. North Side 1st Floor	Male Visitor's	105 CMR 451.353	Interior Maintenance: Wall vent dusty
	Bathroom		
6. North Side 1st Floor	Female Visitor's	105 CMR 451.353	Interior Maintenance: Wall vent dusty
	Bathroom		
7. North Side 2nd Floor	Room # N203	105 CMR 451.353*	Interior Maintenance: Hole in ceiling tile
8. North Side 2nd Floor	Room # N205	105 CMR 451.353*	Interior Maintenance: Hole in ceiling tile
9. North Side 2nd Floor	Barber Shop	105 CMR 451.353	Interior Maintenance: No barbicide
			available for sanitizing equipment
10. North Side 2nd Floor	Barber Shop	105 CMR 451.353*	Interior Maintenance: Floor tile missing
11. North Side 3rd Floor	Room # N301	105 CMR 451.353	Interior Maintenance: Ceiling paint peeling
12. North Side 3rd Floor	Room # N302	105 CMR 451.350*	Structural Maintenance: Window
			damaged
13. North Side 3rd Floor	Room # N303	105 CMR 451.353	Interior Maintenance: Missing floor under
			the window
14. Maintenance Cage	Maintenance Storage	105 CMR 451.353	Interior Maintenance: Wet mop stored in
			bucket
15. Print Shop (off of	Office	105 CMR 451.353	Interior Maintenance: Ceiling tiles water
Gym)			stained
16. Officer's Weight	Hallway (outside)	105 CMR 451.353*	Interior Maintenance: Ceiling damaged
Room			
17. Gym		105 CMR 451.353*	Interior Maintenance: Ceiling damaged
18. Janitorial Closet		105 CMR 451.353	Interior Maintenance: Ceiling tiles missing

# Deficiencies under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety) 4 new deficiencies were found during the inspection:

1.	Nurse's Office	105 CMR 451.402(B)	Procedures; Records; Record-Keeping Log: Generator had no written procedures for maintaining compliance with 480.000. Standard found in 105 CMR 480.500(A).
2.	Nurse's Office	105 CMR 451.402(B)	Procedures; Records; Record-Keeping Log: Generator lacked written procedures for safe handling within the facility. Standard found in 105 CMR 480.500(A)(2).

3.	Nurse's Office	105 CMR 451.402(B)	Procedures; Records; Record-Keeping Log: Generator had no written documentation for blood borne pathogen training. Standard found in 105 CMR 480.500(A)(3).
4.	Nurse's Office	105 CMR 451.402(B)	Procedures; Records; Record-Keeping Log: Generator had no written documentation of emergency contact information. Standard found in 105 CMR 480.500(A)(4).

### **Annex**

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

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

1.	First Floor	Bathroom	105 CMR 451.123*	Maintenance: Ceiling fan dusty
2.	Basement	Inmate Bathroom	105 CMR 451.110(A)	Hygiene Supplies at Toilet and Handwash Sink:
				No soap at handwash sink
3.	Basement	Inmate Bathroom	105 CMR 451.110(A)	Hygiene Supplies at Toilet and Handwash Sink:
				No paper towels at handwash sink

# Deficiencies under the Recommended Standards (.300 series)

1 new deficiency was found during the inspection:

1.	Basement	C-Tech Classroom	105 CMR 451.353	Interior Maintenance: Wall paint peeling

# **SECTION 2: Areas Found to be in Compliance**

EHRS inspected 108 additional areas of the facility which were found to be in compliance.

# **Section 3: Areas EHRS did not inspect**

EHRS did not inspect 6 areas of the facility because they were locked, in use, or under construction:

1.	Main Building	South Side 1st Floor	Parole Office	Unable to Inspect – Locked
2.	Main Building	Second Floor Lobby	Assistant Superintendent's Office	Unable to Inspect – In Use
			Office	
3.	Main Building	Second Floor Lobby	Superintendent's Office	Unable to Inspect – In Use
4.	Main Building	South Side 3rd Floor	Investigator's Office	Unable to Inspect – Locked
5.	Main Building	North Side 2nd Floor	Counselor's Office	Unable to Inspect – Locked
6.	Main Building	Hallway	Offices	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. The plan should be signed by the Superintendent or Administrator and submitted to my attention, at the address listed above.

# **SECTION 5: Observations and Recommendations**

- 1. The inmate population was 99 at the time of inspection.
- 2. The barber shop did not have any barbicide available to sanitize the equipment during the inspection. The EHRS recommends implementing a policy to ensure that equipment is cleaned and sanitized in between each use and barbicide is available at all times for use.
- 3. The facility was unable to produce written procedures that were site specific as it relates to assuring compliance with 105 CMR 480.000.

To review the specific regulatory requirements please visit our website at <a href="www.mass.gov/dph/dcs">www.mass.gov/dph/dcs</a> and click on "Correctional Facilities" <a href="https://docs.python.org/105">105 CMR 451.000</a> is 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 <a href="https://docs.python.org/105">here.</a>

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,

Amy Riordan, MPH

Senior Advisor, 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 KATI

Marlborough, MA 01752 Phone: 617-624-6000 KATHLEEN E. WALSH Secretary

ROBERT GOLDSTEIN, MD, PhD Commissioner

> Tel: 617-624-6000 www.mass.gov/dph

April 16, 2025

Kevin F. Coppinger, Sheriff Essex County Sheriff's Department Headquarters 20 Manning Avenue Middleton, MA 01929 (electronic copy)

Re: Facility Inspection - Essex County Correctional Alternative Center, Lawrence

# Dear Sheriff Coppinger:

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 February 25, 2025. 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.

Amy Riordan, MPH Senior Advisor, EHRS, BCEH

cc: Steven Hughes, Director, EHRS, BCEH Sean Gallagher, EHSO

(electronic copy)

From: Sean Gallagher
To: Riordan, Amy (DPH)

 Subject:
 Fw: Message from "RNP583879A06BD0"

 Date:
 Wednesday, April 16, 2025 12:18:21 PM

**Attachments:** 20250416122843299.pdf

CAUTION: This email originated from a sender outside of the Commonwealth of Massachusetts mail system. Do not click on links or open attachments unless you recognize the sender and know the content is safe.

From: ECSD Scanner Email <ecsdscanner@essexsheriffma.org>

**Sent:** Wednesday, April 16, 2025 12:28 PM

**To:** Sean Gallagher < SGallagher@essexsheriffma.org>

**Subject:** Message from "RNP583879A06BD0"

This E-mail was sent from "RNP583879A06BD0" (IM C4510).

Scan Date: 04.16.2025 12:28:43 (-0400) Queries to: ecsdscanner@essexsheriffma.org



# **Essex County Sheriff's Department**

Essex County Pre-Release Center 165 Marston St Lawrence, MA 01841



Telephone 978-750-1900 www.essexsheriffma.org

Kevin F. Coppinger Sheriff

Heidi Mora Superintendent

March 24, 2025

Amy Riordan Environmental Health Inspector Department of Public Health

Dear Amy Riordan

Here is the Corrective Action plan for the Essex County Sheriff's Department Pre Release Cener Located At 165 Marston Street From our Inspection In March 2025.

Thank You, Sean Gallagher

Superintendent Heidi Mora



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

MAURA T. HEALEY
Governor

KIMBERLEY L. DRISCOLL Lieutenant Governor 67 Forest Street Suite # 100 Marlborough, MA 01752 Phone: 617-624-5757

KATHLEEN E. WALSH Secretary

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> Tel: 617-624-6000 www.mass.gov/dph

March 10, 2025

Kevin F. Coppinger, Sheriff
Essex County Sheriff's Department Headquarters
20 Manning Avenue
Middleton, MA 01929 (electronic copy)

Re: Facility Inspection - Essex County Correctional Alternative Center, Lawrence

# Dear Sheriff Coppinger:

The Massachusetts Department of Public Health (Department) Division of Environmental Health Regulations and Standards (EHRS) conducted an inspection of the Essex County Correctional Alternative Center on February 25, 2025 accompanied by Sean Gallagher, Director of Operations and Captain Jim Comeau, in accordance with Department regulations 105 CMR 451.000: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facilities.

The inspection identified 74 total deficiencies: 35 deficiencies under the Required Standards (.100 and .200 series), 16 repeat deficiencies under the Required Standards, 12 deficiencies under the Recommended Standards (.300 series), 7 repeat deficiencies under the Recommended Standards, and 4 deficiencies 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.

17. North Side 1st Floor	Tray Room	105 CMR 451.200	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, sprayer head moldy at sink. Standard found in 105 CMR 590; FC 6-501.12(A). Spray head removed and disinfected
18. Kitchen	Refrigerators	105 CMR 451.200*	Maintenance and Operation, Equipment: Equipment components not maintained in a state of good repair, mold on gaskets in refrigerator # 3. Standard found in 105 CMR 590; FC 4- 501.11(B). Gasket cleaned
19. Kitchen	Dry Storage Closet	105 CMR 451.200	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, wall fan dusty. Standard found in 105 CMR 590; FC 6-501.11. Fan cleaned
20. Kitchen	Main Area	105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not in good repair, ceiling leaking in freezer. Standard found in 105 CMR 590; FC 6-501.11. Freezer in process of being replaced expected completion date 8/25
21. Kitchen	Main Area	105 CMR 451.200*	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, excessive ice build-up on floor in freezer. Standard found in 105 CMR 590; FC 6-501.12(A). Freezer in process of being replaced expected completion date 8/25
22. Kitchen	2-Compartment Sink (Left)	105 CMR 451.200	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, wall fan dusty and doesn't open completely. Standard found in 105 CMR 590; FC 6-501.12(A). Fan cleaned
23. Kitchen	2-Compartment Sink (Right)	105 CMR 451.200	Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, water sprayer moldy at sink. Standard found in 105 CMR 590; FC 6-501.12(A). Spray head removed and disinfected
24. North Side 2nd Floor	Inmate Bathroom	105 CMR 451.123*	Maintenance: Ceiling dirty throughout Bathroom and ceiling cleaned
25. North Side 2nd Floor	Room # N202	105 CMR 451.141	Screens: Screen damaged s <b>creen</b> repaired
26. North Side 2nd Floor	Room # N203	105 CMR 451.141	Screens: Screen missing Screen replaced

34. Maintenance Cage	Maintenance Storage	105 CMR 451.141	Screens: Screen missing SCREEN REPLACED
35. Main Bathroom	Toilets and Handwash Sinks	105 CMR 451.130	Plumbing: Plumbing not maintained in good repair, sink # 9 loose Sink repaired
36. Main Bathroom	Toilets and Handwash Sinks	105 CMR 451.123	Maintenance: Wall missing under sink Access panel cover replaced
37. Main Bathroom	Main Shower	105 CMR 451.123*	Maintenance: Walls dirty in shower # 2, 5, 7, 8, 9, and 10 Showers cleaned
38. Main Bathroom	Main Shower	105 CMR 451.123	Maintenance: Walls dirty in shower # 1 Showers cleaned
39. Main Bathroom	Main Shower	105 CMR 451.123*	Maintenance: Ceiling dirty throughout Ceiling cleaned
40. Main Bathroom	Main Shower	105 CMR 451.123	Maintenance: Ceiling vent rusted  Covers removed and cleaned
41. Main Bathroom	Slop Sink	105 CMR 451.130*	Plumbing: Plumbing not maintained in good repair, not hot water supplied to slop sink hot water turned on
42. Print Shop (off of Gym)	Toilets and Handwash Sinks	105 CMR 451.123	Maintenance: Ceiling vent dusty  Covers removed and cleaned
43. Officer's Weight Room	Male Staff Bathroom	105 CMR 451.123	Maintenance: Baseboard damaged near showers Baseboard repaired

# Deficiencies under the Recommended Standards (.300 series)

11 new deficiencies and 7 repeat deficiencies (indicated by an \*) were found during the inspection:

1.	South Side 2nd Floor	Room # S209	105 CMR 451.350	Structural Maintenance: Wall damaged Wall repaired
2.	South Side 2nd Floor	Room # S211	105 CMR 451.350*	Structural Maintenance: Ceiling damaged Ceiling repaired
3.	South Side 3rd Floor	Room # S303	105 CMR 451.353	Interior Maintenance: Floor tile damaged Floor repaired
4.	South Side 3rd Floor	Room # S304	105 CMR 451.353	Interior Maintenance: Missing outlet cover by door outlet cover replaced
5.	North Side 1st Floor	Male Visitor's Bathroom	105 CMR 451.353	Interior Maintenance: Wall vent dusty Vent cleaned
6.	North Side 1st Floor	Female Visitor's Bathroom	105 CMR 451.353	Interior Maintenance: Wall vent dusty Vent cleaned
7.	North Side 2nd Floor	Room # N203	105 CMR 451.353*	Interior Maintenance: Hole in ceiling tile  Hole repaired
8.	North Side 2nd Floor	Room # N205	105 CMR 451.353*	Interior Maintenance: Hole in ceiling tile  Hole repaired
9.	North Side 2nd Floor	Barber Shop	105 CMR 451.353	Interior Maintenance: No barbicide available for sanitizing equipment Barbicide refilled and restocked
10.	North Side 2nd Floor	Barber Shop	105 CMR 451.353*	Interior Maintenance: Floor tile missing
				Ceiling repaired
11.	North Side 3rd Floor	Room # N301	105 CMR 451.353	Interior Maintenance: Ceiling paint peeling
12.				Ceiling repaired

13. North Side 3rd Floor	Room # N302	105 CMR 451.350*	Structural Maintenance: Window damaged Window replaced
14. North Side 3rd Floor	Room # N303	105 CMR 451.353	Interior Maintenance: Missing floor under the window floor repaired
15. Maintenance Cage	Maintenance Storage	105 CMR 451.353	Interior Maintenance: Wet mop stored in bucket bucket removed
16. Print Shop (off of Gym)	Office	105 CMR 451.353	Interior Maintenance: Ceiling tiles water stained ceiling tiles replaced
17. Officer's Weight Room	Hallway (outside)	105 CMR 451.353*	Interior Maintenance: Ceiling damaged Cileling repaired
18. Gym		105 CMR 451.353*	Interior Maintenance: Ceiling damaged Ceiling repaired
19. Janitorial Closet		105 CMR 451.353	Interior Maintenance: Ceiling tiles missing All ceiling tiles removed

# Deficiencies under 105 CMR 451.402(B) (other conditions that may constitute a threat to health or safety) 4 new deficiencies were found during the inspection:

1.	Nurse's Office	105 CMR 451.402(B)	Procedures; Records; Record-Keeping Log: Generator had no written procedures for maintaining compliance with 480.000. Standard found in 105 CMR 480.500(A). Procedure for hazardous clean up located in disaster manual
2.	Nurse's Office	105 CMR 451.402(B)	Procedures; Records; Record-Keeping Log: Generator lacked written procedures for safe handling within the facility. Standard found in 105 CMR 480.500(A)(2). Procedure for hazardous clean up located in disaster manual
3.	Nurse's Office	105 CMR 451.402(B)	Procedures; Records; Record-Keeping Log: Generator had no written documentation for blood borne pathogen training. Standard found in 105 CMR 480.500(A)(3). Procedure for hazardous clean up located in disaster manual
4.	Nurse's Office	105 CMR 451.402(B)	Procedures; Records; Record-Keeping Log: Generator had no written documentation of emergency contact information. Standard found in 105 CMR 480.500(A)(4). Procedure for hazardous clean up located in disaster manual

# **Annex**

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

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

1.	First Floor	Bathroom	105 CMR 451.123*	Maintenance: Ceiling fan dusty ceiling vent removed and cleaned
2.	Basement	Inmate Bathroom	105 CMR 451.110(A)	Hygiene Supplies at Toilet and Handwash Sink: No soap at handwash sink soap added to sink area
3.	Basement	Inmate Bathroom	105 CMR 451.110(A)	Hygiene Supplies at Toilet and Handwash Sink: No paper towels at handwash sink paper towels added to sink area

# Deficiencies under the Recommended Standards (.300 series)

1 new deficiency was found during the inspection:

# **SECTION 2: Areas Found to be in Compliance**

EHRS inspected 108 additional areas of the facility which were found to be in compliance.

# Section 3: Areas EHRS did not inspect

EHRS did not inspect 6 areas of the facility because they were locked, in use, or under construction:

1.	Main Building	South Side 1st Floor	Parole Office	Unable to Inspect – Locked
2.	Main Building	Second Floor Lobby	Assistant Superintendent's Office	Unable to Inspect – In Use
3.	Main Building	Second Floor Lobby	Superintendent's Office	Unable to Inspect – In Use
4.	Main Building	South Side 3rd Floor	Investigator's Office	Unable to Inspect – Locked
5.	Main Building	North Side 2nd Floor	Counselor's Office	Unable to Inspect – Locked
6.	Main Building	Hallway	Offices	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. The plan should be signed by the Superintendent or Administrator and submitted to my attention, at the address listed above.

### **SECTION 5: Observations and Recommendations**

- 1. The inmate population was 99 at the time of inspection.
- The barber shop did not have any barbicide available to sanitize the equipment during the inspection. The EHRS
  recommends implementing a policy to ensure that equipment is cleaned and sanitized in between each use and
  barbicide is available at all times for use.
- 3. The facility was unable to produce written procedures that were site specific as it relates to assuring compliance with 105 CMR 480.000.

To review the specific regulatory requirements please visit our website at <a href="www.mass.gov/dph/dcs">www.mass.gov/dph/dcs</a> and click on "Correctional Facilities" <a href="https://docs.ncb/105.cm/105.cm/451.000">105.cm/

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

	Amy Riordan, MPH Senior Advisor, EHRS, BCEH

Sincerely,

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



MAURA T. HEALEY
Governor

KIMBERLEY DRISCOLL
Lieutenant Governor

# 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 Phone: 617-624-6000

KATHLEEN E. WALSH Secretary

ROBERT GOLDSTEIN, MD, PhD Commissioner

> Tel: 617-624-6000 www.mass.gov/dph

April 17, 2025

Kevin F. Coppinger, Sheriff Essex County Sheriff's Department Headquarters 20 Manning Avenue Middleton, MA 01929 (electronic copy)

Re: Facility Inspection - Essex County Correctional Alternative Center, Lawrence

# Dear Sheriff Coppinger:

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 February 25, 2025. After review, the EHRS finds the plan addresses all the deficiencies noted in the report with the following exception:

1. Please indicate if the wall paint peeling in the Annex C-Tech Classroom has been repaired.

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

Sincerely

Amy Riordan, MPH Senior Advisor, EHRS, BCEH

cc: Steven Hughes, Director, EHRS, BCEH Heidi Mora, Superintendent Sean Gallagher, EHSO

(electronic copy) (electronic copy)



MAURA T. HEALEY Governor KIMBERLEY DRISCOLL Lieutenant Governor

# 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 Phone: 617-624-6000

KATHLEEN E. WALSH Secretary

ROBERT GOLDSTEIN, MD, PhD
Commissioner

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May 16, 2025

Kevin F. Coppinger, Sheriff Essex County Sheriff's Department Headquarters 20 Manning Avenue Middleton, MA 01929 (electronic copy)

Re: Plan of Correction – Essex County Correctional Alternative Center, Lawrence

# Dear Sheriff Coppinger:

The Massachusetts Department of Public Health's, Bureau of Climate and Environmental Health (BCEH), Division of Environmental Health Regulations and Standards (EHRS) received an incomplete Plan of Correction from your facility on April 16, 2025. On April 17, 2025, a response was sent which outlined the deficiency in your POC and detailed the necessary requirements for acceptance. To date we have not received an updated POC which addresses the outstanding deficiency. Please submit a revised POC to my attention. As a reminder 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 Senior Advisor, EHRS, BCEH

cc: Steven Hughes, Director, EHRS, BCEH Heidi Mora, Superintendent Sean Gallagher, EHSO

(electronic copy)
(electronic copy)



# **Essex County Sheriff's Department**

**Essex County Pre-Release Center** 165 Marston St Lawrence, MA 01841



Telephone 978-750-1900 www.essexsheriffma.org

Kevin F. Coppinger Sheriff

Heidi Mora Superintendent

May 16,2025

Amy Riordan **Environmental Health Inspector** Department of Public Health

**Dear Amy Riordan** 

The walls in the C- tech classroom are being repainted and the floors are being replaced with a finish date expected September 2025.

h Mult Thank You Sean Gallagher





MAURA T. HEALEY
Governor
KIMBERLEY DRISCOLL

Lieutenant Governor

# The Commonwealth of Massachusetts

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KATHLEEN E. WALSH Secretary

ROBERT GOLDSTEIN, MD, PhD Commissioner

Tel: 617-624-6000 www.mass.gov/dph

May 21, 2025

Kevin F. Coppinger, Sheriff Essex County Sheriff's Department Headquarters 20 Manning Avenue Middleton, MA 01929 (electronic copy)

Re: Plan of Correction – Essex County Correctional Alternative Center, Lawrence

Dear Sheriff Coppinger:

The Massachusetts Department of Public Health, Division of Environmental Health Regulations and Standards (EHRS) has received your Plan of Correction dated May 16, 2025. After review, the EHRS finds the plan addresses all the deficiencies noted in the report:

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

Sincerely

Amy Riordan, MPH

Senior Advisor, EHRS, BCEH

cc: Heidi Mora, Superintendent Sean Gallagher, EHSO (electronic copy) (electronic copy)