

## 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
5 Randolph Street, Capton, MA 02021

5 Randolph Street, Canton, MA 02021 617-624-6000 | mass.gov/dph

Maura T. Healey Governor Kiame Mahaniah, MD, MBA Secretary

Kimberley Driscoll Lieutenant Governor Robert Goldstein, MD, PhD Commissioner

July 28, 2025

| To: | Shawn Jenkins, Commissioner, Department of Corrections                   | (electronic copy) |
|-----|--|-------------------|
|     | Kiame Mahaniah, Secretary, Executive Office of Health and Human Services | (electronic copy) |
|     | Clerk, Massachusetts House of Representatives                            | (electronic copy) |
|     | Clerk, Massachusetts Senate  | (electronic copy) |
|     | Christopher Cochran, Environmental Health and Safety Officer             | (electronic copy) |

#### Greetings,

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

Sincerely,

Patrick Wallace

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Environmental Health Inspector, EHRS, BCEH

| Cc: | Robert Goldstein, MD, PhD, Commissioner, DPH                              | (electronic copy) |
|-----|---|-------------------|
|     | Terrence Reidy, Secretary, Executive Office of Public Safety and Security | (electronic copy) |
|     | Thomas McKean, Director, Barnstable Health Division                       | (electronic copy) |
|     | Brianna Arruda, Director, Policy Development and Compliance Unit          | (electronic copy) |
|     | James Anglin, Special Sheriff/Superintendent                              | (electronic copy) |
|     | Captain Kenneth R. Shaffer, Policies Procedures and Compliance            | (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

MAURA T. HEALEY
Governor
KIMBERLEY L. DRISCOLL

Lieutenant Governor

5 Randolph Street Canton, MA 02021 Phone: 617-624-5757

KATHLEEN E. WALSH Secretary ROBERT GOLDSTEIN, MD,

PhD Commissioner

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

June 17, 2025

Donna Buckley, Sheriff
Barnstable County Correctional Facility
6000 Sheriff's Place
Bourne, MA 02532 (electronic copy)

Re: Facility Inspection - Barnstable County Correctional Facility, Bourne

Dear Sheriff Buckley:

The Massachusetts Department of Public Health (Department) Division of Environmental Health Regulations and Standards (EHRS) conducted an inspection of the Barnstable County Correctional Facility on June 4, 2025 accompanied by Captain Kenneth Shaffer, Policies, Procedures, and Compliance, and Lee Yi, Assistant Facilities Director in accordance with Department regulations 105 CMR 451.000: Minimum Health and Sanitation Standards and Inspection Procedures for Correctional Facilities.

The inspection identified 41 total deficiencies: 21 new deficiencies under the Required Standards (.100 and .200 series), 13 repeat deficiencies under the Required Standards, 3 new deficiencies under the Recommended Standards (.300 series), and 4 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**

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

21 new deficiencies and 13 repeat deficiencies (indicated by an \*) were found during the inspection:

| 451.123* Maintenance: Wall epoxy damaged in shower # 2  451.130 Plumbing: Plumbing not maintained in good repair, drain clogged in shower # 3  451.123 Maintenance: Walls dirty in shower # 3  451.123* Maintenance: Epoxy damaged in shower # 3  451.123* Maintenance: Soap scum on floor  451.123* Maintenance: Floor dirty  451.123* Maintenance: Ceiling dirty  451.123* Maintenance: Ceiling dirty in shower # 3  451.123* Maintenance: Ceiling dirty in shower # 3  451.123* Maintenance: Ceiling dirty in shower # 3  451.123* Maintenance: Floor epoxy damaged in shower # 1  451.123 Maintenance: Bench dirty in shower # 3  451.123* Maintenance: Walls stained in shower # 3  451.123* Maintenance: Walls dirty in shower # 1  451.123* Maintenance: Floor dirty in shower # 1  451.123* Maintenance: Walls dirty in shower # 1 |
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| 451.123* Maintenance: Epoxy damaged in shower #3 451.123 Maintenance: Soap scum on floor 451.123* Maintenance: Floor dirty 451.123* Maintenance: Ceiling dirty 451.123* Maintenance: Floor dirty 451.123 Maintenance: Ceiling dirty in shower #3 451.123* Maintenance: Ceiling dirty in shower #3 451.123* Maintenance: Floor epoxy damaged in shower #1 451.123 Maintenance: Bench dirty in shower #3 451.123 Maintenance: Walls stained in shower #3 451.123* Maintenance: Floor dirty in shower #1 451.123* Maintenance: Walls dirty in shower #1 451.123* Maintenance: Walls dirty in shower #1 451.123* Maintenance: Walls dirty in shower #1 451.120 Plumbing: Plumbing not maintained in good repair, top shower head out-of-  |
| #3  451.123 Maintenance: Soap scum on floor  451.123* Maintenance: Floor dirty  451.123* Maintenance: Ceiling dirty  451.123* Maintenance: Floor dirty  451.123 Maintenance: Ceiling dirty in shower #3  451.123* Maintenance: Ceiling dirty in shower #3  451.123* Maintenance: Floor epoxy damaged in shower #1  451.123 Maintenance: Bench dirty in shower #3  451.123 Maintenance: Walls stained in shower #3  451.123* Maintenance: Floor dirty in shower #1  451.123* Maintenance: Floor dirty in shower #1  451.123* Maintenance: Walls dirty in shower #1  451.123* Maintenance: Walls dirty in shower #1  451.130 Plumbing: Plumbing not maintained in good repair, top shower head out-of-  |
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| 451.123* Maintenance: Walls dirty in shower # 1 451.130 Plumbing: Plumbing not maintained in good repair, top shower head out-of-   |
| 451.130 Plumbing: Plumbing not maintained in good repair, top shower head out-of-   |
| good repair, top shower head out-of-  |
|   |
| 451.123* Maintenance: Floor dirty in shower # 1 and 3   |
| 451.123 Maintenance: Floor dirty in shower # 2  |
| 451.123 Maintenance: Ceiling dirty in shower # 1 and 3  |
| 451.200 Maintenance and Operation; Premises, Structure, Attachments, and Fixtures - Methods: Facility not cleaned as often as necessary, floor dirty throughout kitchen. Standard found in 105 CMR 590; FC 6- 501.12(A).  |
| 451.200 Design and Construction, Functionality: Cold holding equipment not equipped with a permanently affixed temperature measuring device, no thermometer inside. Standard found in 105 CMR 590; FC 4-204.112(B). ** Corrected On-Site **   |
|   |
| •   |

| 24. Food Service | Walk-In Freezer        | 105 CMR 451.200* | Maintenance and Operation; Premises,<br>Structure, Attachments, and Fixtures -<br>Methods: Facility not cleaned as often as<br>necessary, ice build-up on ceiling.<br>Standard found in 105 CMR 590; FC 6-<br>501.12(A).  |
|------------------|------------------------|------------------|---|
| 25. Food Service | Griddle                | 105 CMR 451.200  | Maintenance and Operation, Equipment: Equipment not maintained in a state of good repair, griddle out-of-order. Standard found in 105 CMR 590; FC 4- 501.11(A).   |
| 26. Food Service | Kettle Area            | 105 CMR 451.200  | Maintenance and Operation; Premises,<br>Structure, Attachments, and Fixtures -<br>Methods: Facility not cleaned as often as<br>necessary, floor dirty. Standard found in<br>105 CMR 590; FC 6-501.12(A).  |
| 27. Food Service | Maxx Cold Refrigerator | 105 CMR 451.200* | Maintenance and Operation, Equipment:<br>Equipment not maintained in a state of<br>good repair, refrigerator out-of-order.<br>Standard found in 105 CMR 590; FC 4-<br>501.11(A).  |
| 28. Food Service | True Warming Units     | 105 CMR 451.200  | Maintenance and Operation, Equipment: Equipment components not maintained in a state of good repair, gaskets damaged and dirty on warmer # 1 and 2. Standard found in 105 CMR 590; FC 4-501.11(B).  |
| 29. Food Service | Tool Closet # SV129    | 105 CMR 451.200  | Maintenance and Operation; Premises,<br>Structure, Attachments, and Fixtures -<br>Methods: Facility not in good repair,<br>ceiling water stained. Standard found in<br>105 CMR 590; FC 6-501.11.  |
| 30. Food Service | Dishwashing Area       | 105 CMR 451.200  | Maintenance and Operation, Equipment: Inadequate water temperature in the mechanical warewashing machine, temperature recorded at 153°F (Pf). Standard found in 105 CMR 590; FC 4-501.112(A)(2).  |
| 31. Food Service | Dishwashing Area       | 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)

3 new deficiencies and 4 repeat deficiencies (indicated by an \*) were found during the inspection:

| 1. | House 1 | All Pods | Cells            | 105 CMR 451.320* | Cell Size: Inadequate floor space in all cells, cells double bunked |
|----|---------|----------|------------------|------------------|---|
| 2. | House 1 | Pod B    | Main Area        | 105 CMR 451.353  | Interior Maintenance: Ceiling water stained above television        |
| 3. | House 1 | Pod C    | Main Area        | 105 CMR 451.353* | Interior Maintenance: Wall paint damaged                            |
| 4. | House 1 | Pod C    | Janitor's Closet | 105 CMR 451.353  | Interior Maintenance: Wall paint damaged                            |
| 5. | House 2 | All Pods | Cells            | 105 CMR 451.320* | Cell Size: Inadequate floor space in all cells, cells double bunked |
| 6. | House 2 | Pod H    | Main Area        | 105 CMR 451.353  | Interior Maintenance: Ceiling water stained at top of stairs        |
| 7. | House 3 | All Pods | Cells            | 105 CMR 451.320* | Cell Size: Inadequate floor space in all cells, cells double bunked |
|    |         |          |                  |                  |   |

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

EHRS inspected 158 additional areas of the facility which were found to be in compliance.

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

EHRS was unable to inspect 4 areas of the facility because they were locked, under construction, closed, or in-use.

| 1. | House 1 | Pod A | Lower Showers | Unable to Inspect Shower # 3 – In Use |
|----|---------|-------|---------------|---------------------------------------|
| 2. | House 2 | Pod F |               | Unable to Inspect – Closed            |
| 3. | House 2 | Pod G |               | Unable to Inspect – Closed            |
| 4. | House 3 | Pod K |               | Unable to Inspect – Closed            |

#### **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 257 at the time of inspection.

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="105">105</a> CMR 451.000 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 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:

- <u>105 CMR 205.000</u>: 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,

Patrick Wallace

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Environmental Health Inspector, EHRS, BCEH



# OFFICE OF THE SHERIFF BARNSTABLE COUNTY

The Commonwealth of Massachusetts

6000 Sheriff's Place, Bourne, MA 02532 508.563.4300 Fax: 508.563.4574 BCSO@bsheriff.net



Sheriff Donna D. Buckley

July 03, 2025

Patrick Wallace
Environmental Health Inspector
Community Sanitation Program
Center for Environmental Health
Massachusetts Department of Public Health
5 Randolph Street
Canton, MA 02021

Dear Inspector Wallace:

Please find the following letter as the response for corrective action to the June 4, 2025, inspection of the Barnstable County Correctional Facility.

Addressing the violations regarding "Cell Size: inadequate floor space" notations for Pods A, B, C, D, E, G, H, J, K, L and M, I would like to reiterate from past response letters that we are aware of the concern the Department of Health has with overcrowding situations, however, the Department of Corrections stipulates the regulations which guided the construction of our facility in 2004 and we understand there are discussion in the works for consistency between DOC and DPH regulations.

Below is a breakdown of the remaining violations and how they have been corrected:

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

1. House 1 Pod A Lower Showers 105 CMR 451.123\*

Maintenance: Wall epoxy damaged in shower # 2

Corrective Action: Maintenance assessed the epoxy damage reported in Pod A Lower Tier Shower #2 and submitted a request for a quote from an outside agency to address the epoxy issue.

Projected date of completion: July 31, 2025

2. House 1 Pod B Showers 105 CMR 451.130 Plumbing: Plumbing not maintained in good repair, drain clogged in shower #3

Corrective Action: Work Order issued and drain was unclogged

3. House 1 Pod C Lower Showers 105 CMR 451.123

Maintenance: Walls dirty in shower #1

Corrective Action: Inmate Unit Cleaners directed to clean shower walls Projected date of completion: completed

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4. House 1 Pod C Lower Showers 105 CMR 451.123

Maintenance: Light out in shower #3

Corrective Action: Work Order submitted for lightbulb to be replaced

Projected date of completion: completed

5. House 1 Pod C Upper Showers 105 CMR 451.123\*

Maintenance: Epoxy damaged in shower #3

Corrective Action: Maintenance assessed the epoxy damage reported in Pod C Upper Tier Showers and submitted a request for a quote from an outside agency to address the epoxy issue.

Projected date of completion: July 31, 2025

6. House 2 Pod D Shower – 2<sup>nd</sup> Floor 105 CMR 451.123

Maintenance: Soap scum on floor

Corrective Action: Inmate Unit Cleaners directed to clean soap scum from shower

floor

Projected date of completion: completed

7. House 2 Pod H Shower – 1<sup>st</sup> Floor 105 CMR 451.123\*

Maintenance: Floor dirty

Corrective Action: Inmate Unit Cleaners directed to clean soap scum from shower

floor

Projected date of completion: completed

8. House 2 Pod H Shower – 1<sup>st</sup> Floor 105 CMR 451.123\*

Maintenance: Ceiling dirty

Corrective Action: Inmate Unit Cleaners directed to clean ceiling in shower

9. House 2 Pod H Shower – 2<sup>nd</sup> Floor 105 CMR 451.123\*

Maintenance: Floor dirty

Corrective Action: Inmate Unit Cleaners directed to clean floor in 2<sup>nd</sup> Floor shower Projected date of completion: completed

10. House 3 Pod J Showers – 1<sup>st</sup> Floor 105 CMR 451.123

Maintenance: Ceiling dirty in Shower #3

Corrective Action: Inmate Unit Cleaners directed to clean ceiling in Shower #3 Projected date of completion: completed

11. House 3 Pod L Showers – 1<sup>st</sup> Floor 105 CMR 451.123\*

Maintenance: Ceiling dirty in Shower #3

Corrective Action: Inmate Unit Cleaners directed to clean ceiling in Shower #3 Projected date of completion: completed

12. House 3 Pod L Showers – 1<sup>st</sup> Floor 105 CMR 451.123\*

Maintenance: Floor epoxy damaged in Shower #1

Corrective Action: Maintenance assessed the epoxy damage reported in Pod L 1<sup>st</sup> Floor Showers and submitted a request for a quote from an outside agency to address the epoxy issue.

Projected date of completion: July 31, 2025

13. House 3 Pod L Showers – 1<sup>st</sup> Floor 105 CMR 451.123

Maintenance: Bench dirty in Shower #3

Corrective Action: Inmate Unit Cleaners directed to clean bench in Shower #3 Projected date of completion: completed

14. House 3 Pod L Showers – 2<sup>nd</sup> Floor 105 CMR 451.123

Maintenance: Walls stained in Shower #3

Corrective Action: Inmate Unit Cleaners directed to clean walls in Shower #3 and Maintenance scheduled to conduct a power washing of shower walls

Projected date of completion: inmates completed cleaning shower walls and Maintenance to complete power washing by July 31, 2025

15. House 3 Pod M Showers – 1<sup>st</sup> Floor 105 CMR 451.123\* Maintenance: Floor dirty in Shower #1

Corrective Action: Inmate Unit Cleaners directed to clean floor in 1st Floor shower Projected date of completion: completed

16. House 3 Pod M Showers –1<sup>st</sup> Floor 105 CMR 451.123\* Maintenance: Walls dirty in shower #1

Corrective Action: Inmate Unit Cleaners directed to clean walls in 1<sup>st</sup> Floor shower Projected date of completion: completed

17. House 3 Pod M Showers – 1<sup>st</sup> Floor 105 CMR 451.130 Plumbing: Plumbing not maintained in good repair, top shower head out of order in Shower #1

Corrective Action: Work Order submitted to Maintenance to repair shower head in Shower #1

Projected date of completion: completed

House 3 Pod M Showers – 2<sup>nd</sup> Floor 105 CMR 451.123\*
Maintenance: Floor dirty in shower #1 and #3

Corrective Action: Inmate Unit Cleaners directed to clean floor in 2<sup>nd</sup> Floor Showers #1 and #3 Projected date of completion: completed

19. House 3 Pod M Showers – 2<sup>nd</sup> Floor 105 CMR 451.123 Maintenance: Floor dirty in Shower #2

Corrective Action: Inmate Unit Cleaners directed to clean floor in 2<sup>nd</sup> Floor Shower #2

Projected date of completion: completed

20. House 3 Pod M Showers – 2<sup>nd</sup> Floor 105 CMR 451.123 Maintenance: Ceiling dirty in Shower #1 and #3

Corrective Action: Inmate Unit Cleaners directed to clean ceiling in Showers #1 & #3

21. Food Service

105 CMR 451.200

Maintenance and Operation; Premises, Structure, Attachments and Fixtures – Methods: Facility not cleaned as often as necessary, floor dirty throughout kitchen. Standard found in 105 CMR 590; FC 6-501.12(A)

Corrective Action: Kitchen Supervisor to meet with Inmate Kitchen Workers and direct them to conduct thorough cleaning of the kitchen floor throughout the kitchen. The Kitchen Supervisor is to inspect the cleaning progress daily Projected date of completion: completed

22. Food Service Overnight Box Refrigerator 105 CMR 451.200

Design and Construction, Functionality: Cold holding equipment not equipped with a permanently affixed temperature measuring device, no thermometer inside. Standard found in 105 CMR 590; FC 4-204.112 (B)

**Corrective Action: Corrected On Site** 

23. Food Service Tool Room # SV119 105 CMR 451.200

Maintenance and Operations; Premises, Structure, Attachments and Fixtures – Methods:
Facility not cleaned as often as necessary, floor dirty. Standard found in 105 CMR 590:
FC 6-501.12(A)

Corrective Action: Kitchen Supervisor to meet with Inmate Kitchen Workers and direct them to conduct a supervised, thorough cleaning of SV119

Projected date of completion: completed

24. Food Service Walk-In Freezer 105 CMR 451.200\*

Maintenance and Operation; Premises, Structure, Attachments and Fixtures – Methods:
Facility not cleaned as often as necessary, ice build-up on ceiling. Standard found in 105
CMR 590; FC 6-501.12(A)

Corrective Action: Work Order submitted to Maintenance to defrost the ice buildup on the ceiling of the Walk-In Freezer Projected Date of Completion: completed

25. Food Service Griddle 105 CMR 451.200\*

Maintenance and Operation, Equipment: Equipment not maintained in a state of good repair, griddle out of order. Standard found in 105 CMR 590; FC 4-501.11(A)

Corrective Action: Contractor was contracted to repair griddle Projected date of completion: Completed

26. Food Service Kettle Area 105 CMR 451.200

Maintenance and Operation; Premises, Structure, Attachments and Fixtures – Methods:
Facility not cleaned as often as necessary, floor dirty. Standard found in 105 CMR 501.12(A)

Corrective Action: Kitchen Supervisor to meet with Inmate Kitchen Workers and direct them to conduct thorough cleaning of the kitchen floor throughout the kitchen. The Kitchen Supervisor is to inspect the cleaning progress daily Projected date of completion: completed

27. Maxx Cold Refrigerator 105 CMR 451.200\*

Maintenance and Operations, Equipment: Equipment not maintained in a state of good repair, refrigerator out of order. Standard found in 105 CMR 590; FC 4-501.11(A)

Corrective Action: Refrigerator repair contractor contacted to repair refrigerator Projected date of completion: July 31, 2025

28. Food Service True Warming Units 105 CMR 451.200

Maintenance and Operation, Equipment: Equipment components not maintained in a state of good repair, gaskets damaged and dirty on warmer #1 and #2. Standard found in 105 CMR 590; FC 4-501.11 (B)

Corrective Action: New gaskets on order through JWS for warmers #1 and #2 Projected date of completion: July 31, 2025

29. Food Service Tool Closet #SV129 105 CMR 451.200

Maintenance and Operation; Premises, Structure, Attachments and Fixtures – Methods:
Facility not in good repair, ceiling water stained. Standard found in 105 CMR 590; FC 6-501.11

Corrective Action: Ceiling stain reviewed and work order submitted to repair Projected date of completion: July 18, 2025

Food Service Dishwashing Area 105 CMR 451.200
Equipment; Inadequate water temperature in the mechanical warewashing machine, temperature recorded at 153°F (Pf). Standard found in 105 CMR 590; FC 4-501.112(A)(2)

Corrective Action: Maintenance responded to inspect warewashing machine. Temperature was adjusted and a separate warewashing temperature tester was located and run through the machine. The temperature reported was within the required range. Maintenance contacted Joe Warren & Son to inspect and work on any issues the machine may have had with the temperature sensor to prevent future issues

31. Food Service Dishwashing Area 105 CMR 451.200
Numbers and Capacities, Utensils, Temperature Measure 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)

Corrective Action: An irreversible temperature measuring device was located and is being utilized to check the temperature of the warewashing machine.

Projected date of completion: completed

#### Part II: Deficiencies under the Recommended Standards (.300 series)

1. House 1 All Pods Cells 105 CMR 451.320\*
Cell Size: Inadequate floor space in all cells, cells double bunked

Corrective Action: we are aware of the concern the Department of Health has with overcrowding situations, however, the Department of Corrections stipulates the regulations which guided the construction of our facility in 2004. It is our understanding there are discussion in the works for consistency between DOC Code of Massachusetts Regulations (CMRs) and DPH Standards. The Barnstable County Sheriff's Office does make an effort to single bunk as often as possible in the Units.

2. House 1 Pod B Main Area 105 CMR 451.353
Interior Maintenance: Ceiling water stained above television

Corrective Action: A work order was submitted for Maintenance to repair the stain in the ceiling above the television in Pod B Projected date of completion: July 31, 2025

3. House 1 Pod C Main Area 105 CMR 451.353\* Interior Maintenance: Wall paint damaged

Corrective Action: Work order was submitted to Maintenance to paint the damaged wall paint in Pod C Main Area
Projected date of completion: July 31, 2025

4. House 1 Pod C Janitor's Closet 105 CMR 451.353
Interior Maintenance: Wall paint damaged

Corrective Action: Work order was submitted to Maintenance to paint the damaged wall paint in the Pod C Janitor's closet
Projected date of completion: July 31, 2025

5. House 2 All Pods Cells 105 CMR 451.320\*
Cell Size: Inadequate floor space in all cells, cells double bunked

Corrective Action: we are aware of the concern the Department of Health has with overcrowding situations, however, the Department of Corrections stipulates the regulations which guided the construction of our facility in 2004. It is our understanding there are discussion in the works for consistency between DOC Code of Massachusetts Regulations (CMRs) and DPH Standards. The Barnstable County Sheriff's Office does make an effort to single bunk as often as possible in the Units.

6. House 2 Pod H Main Area 105 CMR 451.353
Interior Maintenance: Ceiling water stained at top of the stairs

Corrective Action: A work order was submitted for Maintenance to repair the stain in the ceiling at the top of the stairs in Pod H Projected date of completion: July 31, 2025

7. House3 All Pods Cells 105 CMR 451.320\*
Cell Size: Inadequate floor space in all cells, cells double bunked

Corrective Action: we are aware of the concern the Department of Health has with overcrowding situations, however, the Department of Corrections stipulates the regulations which guided the construction of our facility in 2004. It is our understanding there are discussion in the works for consistency between DOC Code of Massachusetts Regulations (CMRs) and DPH Standards. The Barnstable County Sheriff's Office does make an effort to single bunk as often as possible in the Units.

If you have any questions, please contact me, Superintendent James Anglin, at my office number listed below.

Yours truly,

James Anglin Superintendent Barnstable County Sheriff's Office 6000 Sheriff's Place Bourne, MA 02532 (508) 563-4369

# 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 Healey** Governor

617-624-5757 | mass.gov/dph

5 Randolph Street, Canton, MA 02021 Kiame Mahaniah, MD, MBA Secretary

**Kimberley Driscoll Lieutenant Governor**  Robert Goldstein, MD, PhD Commissioner

July 16, 2025

Donna D. Buckley, Sheriff Barnstable County Correctional Facility 6000 Sheriff's Place Bourne, MA 02532 (electronic copy)

Re: Plan of Correction - Barnstable County Correctional Facility, Bourne

Dear Sheriff Buckley:

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 June 4, 2025. After review, EHRS finds the plan appropriately addresses all of the violations noted in the report with the following exception:

In regards to the issue of overcrowding, EHRS appreciates the limitations of correctional facilities and the need to accommodate the ever-increasing population; however we remain concerned with the overcrowded conditions.

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

Sincerely,

Patrick Wallace

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Environmental Health Inspector, EHRS, BCEH

James Anglin, Special Sheriff/Superintendent cc:

(electronic copy) (electronic copy)

Captain Kenneth R. Shaffer, Policies Procedures and Compliance Christopher Cochran, Environmental Health and Safety Officer

(electronic copy)