MEMORANDUM

To: James E. Dzurenda, Director  
Nevada Department of Corrections

Through: Ihsan Azzam, PhD, MD  
Chief Medical Officer, DPBH

From: Vincent Valiente, REHS, EHS III  
For Paul Shubert, Chief, DPBH

Subject: Prison Commission Meeting

As required by the Nevada Revised Statutes (NRS) 209.382, NRS 444.330 and NRS 446.885, the Division of Public and Behavioral Health (DPBH) conducts regular inspections of State Correctional Facilities. These inspections include:

a) Medical and Dental Services based upon Standards for Medical Facilities as provided in Chapter 449 of NRS.

b) Nutritional Adequacy of Diet based on National Dietary Guidelines. Inspections of diet adequacy take in consideration religious and/or medical dietary recommendations for individual offenders, and adjustments of dietary allowances for age, sex, and level of activity.

c) Sanitation, Healthfulness, Cleanliness and Safety of various institutions and correctional facilities which include a focus on food safety practices.

In compliance with the Nevada Supreme Court order, the Nevada State Chief Medical Officer (CMO) provided the following statement: “The scientific consensus from expert bodies, such as the Institute of Medicine, the American Heart Association, and the Dietary Guidelines Advisory Committee (made up of prestigious researchers and scientists in the fields of nutrition, health, and medicine), is that the average sodium intake among Americans is relatively high and can be reduced. Most healthy eating patterns limit sodium to less than 2300 mg/d.
Going forward, the CMO advises to follow the Dietary Guidelines for Americans (2015-2020) released by the US Departments of Health and Human Services (DHHS) and Agriculture (USDA) to determine nutritional values of food components. Recent studies have shown that diets that align closely with the Dietary Guidelines are associated with a significant reduction in avoidable negative health outcomes."

Pursuant to NRS 209.382, NRS 444.330, and NRS 446.885, during each inspection to a state correctional facility, DPBH inspector/s evaluate inmates’ nutrition and verify that dietitian’s recommendations are appropriately followed. Nutritional adequacy of inmates’ diet is evaluated by onsite direct observations; thorough document review, detailed interviews with staff from that facility and the Inmate Nutrition Adequacy Tool (please see attachment).

Table 1. The attachment summarizes information obtained during the inmate nutritional adequacy verification process in 2018. This table “Critical Violations Identified During Annual Dietary Inspections of State Prisons” summarizes critical violations identified during annual dietary inspections conducted at each state correctional facility from 2012 to 2018.

Two state correctional facilities are medically inspected each year. Please see attachment “Table 2. MEDICAL SURVEYS” that summarizes deficiencies or violations Identified during medical inspections.

The letter "X" signifies a violation, or a deficiency identified during inspections and surveys. Additionally, all violations/deficiencies identified or detected during nutritional and medical inspections conducted at state correctional facility are summarized below in this report.

**Dietary and Sanitation Inspections**

A total of nine critical violations were identified in 2018. Only one out of the seven inspected facilities had no critical violations. Three facilities were cited for at least one critical violation, and three were cited for two critical violations. Compared to 2017, the total number of critical violations cited in 2018 decreased by four. However, four of the seven inspected facilities had repeat critical violations in 2018. Repeat dietary critical violations identified were as follows:

- Equipment not being sanitized (Northern Nevada Correctional Center; Southern Desert Correctional Center)
- Presence of rodents or insects (Northern Nevada Correctional Center)
- Handwashing sinks not fully operational (Ely State Prison)
- Improperly labeled chemicals (Florence McClure Women's Correctional Center)

**Medical Surveys**

A total of eight critical violations were identified in two medically surveyed facilities in 2018. Five of these deficiencies were cited at the High Desert Prison. No repeat deficiencies from the 2014 High Desert Prison Medical Survey were identified. Three deficiencies were cited at the Florence McClure Women’s Correctional Center in 2018; where one of those deficiencies, “Infection Control/hazardous waste disposal” was a repeat from their 2015 survey.
Expanded Summary of Violations Cited in Nevada State Prisons

DIETARY FINDINGS OF CRITICAL VIOLATIONS* IN 2018

One of seven facilities were cited for 0 critical violations

- Warm Springs Correctional Center

Three of seven facilities were cited for 1 critical violation

- Ely State Prison
  1. Handwashing sinks not fully operational (Soap dispensers were in disrepair for multiple handwashing sinks)

- Florence McClure Correctional Center
  1. Improperly labeled and stored chemicals observed (Multiple unlabeled chemical spray bottles were observed within the culinary operations)

- High Desert State Prison
  1. Handwashing sinks not fully operational (Four handwashing sinks were not operational within areas designated for cooking, food preparation and serving)

Three of seven facilities were cited for 2 critical violations

- Lovelock Correctional Center
  1. Improper hygienic practices by culinary staff (Staff observed handling ready-to-eat food with bare-hands)
  2. Equipment not sanitized (The culinary high temperature dish machine was not sanitizing)

- Northern Nevada Correctional Center
  1. Presence of rodents observed (Live rodents and droppings were observed throughout the Culinary and Bakery)
  2. Equipment not sanitized (The culinary high temperature dish machine was in disrepair and not sanitizing)

- Southern Desert Correctional Center
  1. Equipment not sanitized (The pot wash high temperature dish machine was in disrepair and not sanitizing)
  2. Equipment not sanitized (The chow hall high temperature dish machine was in disrepair and not sanitizing)

*Almost all correctable critical violations were corrected by the end of the inspection. The NDOC Compliance Enforcement Officer ensured corrective actions will be promptly taken by the facility for critical violations which could not be corrected by the end of each inspection.
MEDICAL/DENTAL FINDINGS IN 2018

HIGH DESERT STATE PRISON (HOSP) 2/6/18:
1. Pharmaceutical Services
   (Multiple expired medications/medical supplies/biologicals were observed)
2. Emergency Services
   (Man down bag not properly inventoried)
3. Assessment of Patient
   (No documentation of the location of the body of each Fentanyl patch administration and removal)
4. Medical Laboratories
   (Training; Laboratory test and quality controls not performed in accordance to the manufacturer's instructions; hand hygiene not performed before and after patient contact)

FLORENCE MCCLURE WOMEN'S CORRECTIONAL CENTER (FMWCC) 7/25/18:
1. Infection Control (Dental)
   (Unlabeled and unidentified pre-loaded anesthesia injections were observed. The pre-loaded injections were also not administered immediately after preparation)
2. Sterile Supplies and Medical Equipment
   (A chemical to perform high level disinfections was not used per the manufacturer recommendations)
3. Life Safety Code
   (Fire rated, self-closing doors were observed held open by door chalks. The door chalks were preventing the doors from operating as designed)

Included in the Attachment
1. Table 1. DIETARY INSPECTIONS – Critical Violation Identified During Annual Dietary Inspections of State Prison
2. Table 2. MEDICAL SURVEY – Deficiencies Identified During Medical Surveys
3. INMATE NUTRITIONAL ADEQUACY TOOL SUMMARY 2018

Should you have any questions regarding the Biannual Prison Commission Meeting Update, please do not hesitate to contact me at 775-684-1061.
Table 1. DIETARY INSPECTIONS

Critical Violations Identified During Annual Dietary Inspections of State Prisons

<table>
<thead>
<tr>
<th>YEAR</th>
<th>Ely</th>
<th>Florence McClure</th>
<th>High Desert</th>
<th>Lovelock</th>
<th>Northern Nevada</th>
<th>Southern Desert</th>
<th>Warm Springs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12'</td>
<td>13'</td>
<td>14'</td>
<td>15'</td>
<td>16'</td>
<td>17'</td>
<td>18'</td>
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<tr>
<td></td>
<td>12'</td>
<td>13'</td>
<td>14'</td>
<td>15'</td>
<td>16'</td>
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<td>18'</td>
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<td></td>
<td>12'</td>
<td>13'</td>
<td>14'</td>
<td>15'</td>
<td>16'</td>
<td>17'</td>
<td>18'</td>
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<tr>
<td></td>
<td>12'</td>
<td>13'</td>
<td>14'</td>
<td>15'</td>
<td>16'</td>
<td>17'</td>
<td>18'</td>
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<td></td>
<td>12'</td>
<td>13'</td>
<td>14'</td>
<td>15'</td>
<td>16'</td>
<td>17'</td>
<td>18'</td>
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<tr>
<td></td>
<td>12'</td>
<td>13'</td>
<td>14'</td>
<td>15'</td>
<td>16'</td>
<td>17'</td>
<td>18'</td>
</tr>
</tbody>
</table>
| Presence of insects/rodents | X | X | X | X | X | X | X | X | X
| Handwash sinks not fully operational | X | X | X | X | X | X | X | X | X
| Dented cans of food | X | X | X | X | X | X | X | X | X
| Refrigeration at improper temperature | X | X | X | X | X | X | X | X | X
| Improperly labeled/stored chemicals | X | X | X | X | X | X | X | X | X
| Potential for cross-contamination | X | X | X | X | X | X | X | X | X
| Expired/spoiled food | X | X | X | X | X | X | X | X | X
| Equipment not sanitized | X | X | X | X | X | X | X | X | X
| Handwashing sinks not accessible | X | X | X | X | X | X | X | X | X
| Culinary staff hygienic practices cited | X | X | X | X | X | X | X | X | X
| Person-in-Charge not knowledgeable | X | X | X | X | X | X | X | X | X

Sub Total of Critical Violations/ Year: 9
Total Critical Violations years 12'-18': 9
Total Critical Violations 2018: 9

* Re-inspection
## Table 2. MEDICAL SURVEYS

### Deficiencies Identified During Medical Surveys

<table>
<thead>
<tr>
<th></th>
<th>Ely</th>
<th>Florence McClure</th>
<th>High Desert</th>
<th>Lovelock</th>
<th>Northern Nevada</th>
<th>Southern Desert</th>
<th>Warm Springs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>05'</td>
<td>10'</td>
<td>13'</td>
<td>2017</td>
<td>07'</td>
<td>11'</td>
<td>15'</td>
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<tr>
<td>Infection control/hazardous waste disposal</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Sterilizer testing/maintenance</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Sterilizer training</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Medication (expired/storage/secured)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Medication administration issues</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Physician orders</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
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<tr>
<td>Emergency supplies unavailable</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Medications unsecured</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
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<tr>
<td>Inmate TB testing</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Staff TB testing</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Staff CPR</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
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<tr>
<td>Inmate dental care</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Lab staff/lab licensure</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
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<tr>
<td>Lab test (quality control/procedures)</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
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<td>X</td>
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<tr>
<td>Physical environment</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
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<tr>
<td>Inmate consent to treatment</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Dental tool accountability</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>24-hour nursing coverage</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Staff health and safety</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Medical Records</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

**Total of Violations Cited/Year:**

|                        | 7      | 4     | 1 | 4 | 8 | 10 | 1 | 3 | 7 | 10 | 0 | 1 | 7 | 8 | 9 | 7 | 5 | 1 | 3 | 1 | 7 | 5 | 0 | 3 | 5 | 1 | 3 |
## INMATE NUTRITIONAL ADEQUACY TOOL SUMMARY 2018

<table>
<thead>
<tr>
<th>NUTRITIONAL VERIFICATION FOCUS POINTS</th>
<th>ESP</th>
<th>FMWCC</th>
<th>HDSP</th>
<th>LCC</th>
<th>NNCC</th>
<th>SDCC</th>
<th>WSCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Contracted License Dietitian oversight for nutritional adequacy of meals served</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>B) Menus in place to meet the needs of those in the infirmary or on special diets</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>C) Food &amp; Nutrition Board Institute of Medicine, National Academies standards used to review menus by contracted Licensed Dietitian</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>D) Menus followed at the time of inspection</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>E) Spreadsheets available with portion sizes for preparing and serving meals</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>F) Pre-measure portion control utensils available and used</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>G) Religious diets available</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>N/A</td>
</tr>
<tr>
<td>H) Internal process available for inmate to request diet</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>I) Medical oversight for inmates requiring special diets</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>J) Nutritional assessments for special diets conducted by facility</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>K) Special diet ordered by physician for condition or ailment</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>L) Process in place for Medical Staff and Culinary Staff to ensure special diet order was received</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>M) Facility has a standardized process to ensure inmate has received diet at meal time</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>N) Inmate assessments include level of physical activity</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>O) Nutritional content of menus offered by the NDOC were available for inmate review</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

"X" signifies compliant practices verified by observation, document review or interview.
INMATE NUTRITIONAL ADEQUACY TOOL SUMMARY 2018

A) Contracted Licensed Dietitian oversight for nutritional adequacy of meals served
   Michele Cowee; NV License #31976-DL-2; Expiration 3/6/19.
   Also noted: a new NDOC Dietitian has been contracted and is currently reviewing all current menus.

B) Menus in place to meet the needs of those in the infirmary or on special diets
   Each State prison was verified to have special, medical and religious diet menus in place to meet the
   medical needs of the inmates (these diets include: mechanical soft, pureed, low sodium, 1500 Kcal,
   2000 Kcal, low fat/low cholesterol, renal/protein restricted, 2600 Kcal, lactose intolerant, common fare
   religious, vegetarian, double portions, allergen).
   Note: Warm Springs Correctional Center did not have a common fare menu available. Inmates
   requesting a common fare diet are transferred to an institution that does provide the common
   fare diet.

C) Food & Nutrition Board Institute of Medicine, National Academies standards used to review menus by
   contracted Licensed Dietitian
   Verified through the previously contracted licensed Dietitian Mary Agnes Boni.

D) Menus followed at the time of inspection
   All menus offered were followed at the time of inspection for each State prison. In addition, each facility
   holds the previous 72hrs of meals. Each of those meals were consistent with the posted menu at the
   time of inspection.

E) Spreadsheets available with portion sizes for preparing and serving meals
   Spreadsheets with portion sizes were utilized at the time of inspection for each State prison.

F) Pre-measure portion control utensils available and used
   Portion control utensils were observed at the time of inspection for each State prison.

G) Religious diets available
   6 of 7 State prisons currently have inmates on religious/common fare diets. These diets are served
   through separately constructed common fare kitchens at each of the six facilities.

H) Internal process available for inmate to request diet
   During inspection, the KITE system for inmates to request diets was in place at each State prison. An
   inmate requesting a special diet are either assessed by medical or the facility Chaplin for common fare
   request.

I) Medical oversight for inmates requiring special diets
   Each State prison had medical oversight by a physician for inmates requiring special diets. This was
   confirmed onsite within medical during the annual inspections.
J) Nutritional assessments for special diets conducted by facility
   During annual inspections, a sample of inmate files were reviewed at each facility.
   Inmates had nutritional assessments for a special diet if the diet was required.

K) Special diet ordered by physician for condition or ailment
   During annual inspections, a sample of inmate files were reviewed, and each special diet had been
   ordered by the physician or Chaplin. Special diets are ordered after physician assessments or by the
   Chaplin if a religious or common fare diet was requested.

L) Process in place for Medical Staff and Culinary Staff to ensure special diet order was received
   During inspection, it was verified each facility culinary department utilized a special diet report from
   medical to cross check inmates requiring medical diets. Interview with culinary and medical staff
   revealed this list was printed out weekly and daily if necessary. The list also included inmates on
   common/religious diets.

M) Facility has a standardized process to ensure inmate has received diet at meal time
   During inspection, each facility served their special diet menus first while cross checking the weekly
   inmate special diet report. Any inmate who decides not to eat their prescribed diet were documented
   and culinary reported them to medical or the Chaplin.

N) Inmate assessments include level of physical activity
   Facility documentation of 'level of physical activity' was not located during review of inmate files.

O) Nutritional content of menus offered by the NDOC were available for inmate review
   During inspection, 6 of 7 facilities had their menu(s) nutritional content available for inmate review in
   their respective law libraries. High Desert State Prison did not have their menu(s) nutritional content
   available during inspection but the content was added after the inspection.