RESPONSE TO THE COVID-19 PANDEMIC IN CORRECTIONAL FACILITIES

DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS

PERFORMANCE AUDIT SERVICES
ISSUED JUNE 23, 2021
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In compliance with the Americans With Disabilities Act, if you need special assistance relative to this document, or any documents of the Legislative Auditor, please contact Jenifer Schaye, General Counsel, at 225-339-3800.
The purpose of this audit was to provide information on the Department of Public Safety and Corrections’ (DOC) response to the COVID-19 pandemic in the correctional facilities it oversees.

Overall, DOC faced multiple issues and challenges in addressing the COVID-19 pandemic.

DOC protocols complied with CDC guidance in the areas of testing, medical isolation, screening, visitation, personal protective equipment, social distancing, and transfers. However, it did not have processes to verify that correctional facilities implemented these protocols. Although DOC was in regular contact with facilities, it could have implemented a process to verify that facilities were following protocols to reduce the spread of COVID-19. According to stakeholders, protocols may not have been uniformly implemented at all prison facilities.

DOC administered 21,110 COVID-19 tests to prisoners in state correctional facilities from March 2020 through January 2021. Of the 8,211 prisoners tested during that time frame, 3,253 (39.6%) had a positive result. However, DOC did not collect COVID-19 information such as test results and infection rates, on state prisoners housed in local correctional facilities, even though approximately half of state prisoners are housed in these facilities.

DOC faced challenges in providing programming for prisoners during COVID-19 and in not allowing visitors into the facilities. DOC experienced problems with the implementation of video visitation services, and it reported a sharp decrease in the number of education completions between April and June 2020 because programs were suspended to reduce the spread of COVID-19.

Out of 1,100 potential candidates, DOC furloughed 68 out of 100 prisoners approved by the Furlough Review Panel. The panel reviewed a total of 594 prisoners and was suspended in June 2020 after Louisiana entered phase two of recovery. Nationwide prison populations
declined after the start of the pandemic primarily due to diversion efforts that reduced prison admissions, not releases from prisons.

DOC’s existing staffing challenges were exacerbated because of the increase in staff absences during the pandemic. From March through December 2020, DOC correctional facility staff used a total of 1.5 million hours of leave, a 21.7% increase from 1.3 million the prior year. In addition, staff worked 1.2 million hours of overtime.

The report contains our findings, conclusions, and recommendations. I hope this report will benefit you in your legislative decision-making process.

We would like to express our appreciation to DOC for its assistance during this audit.

Respectfully submitted,

Michael J. “Mike” Waguespack, CPA
Legislative Auditor

MJW/aa
Introduction

The purpose of this report is to provide information on the Department of Public Safety and Corrections’ (DOC) response to the COVID-19 pandemic. According to the Prison Policy Initiative\(^1\) and the Louisiana COVID-19 Health Equity Task Force,\(^2\) prisons and jails are at especially high risk for outbreaks of COVID-19 because they are densely populated facilities where social distancing is difficult, sanitation is poor, and medical resources are limited.

DOC’s mission is to enhance public safety through the safe and secure incarceration of prisoners, effective probation/parole supervision, and proven rehabilitative strategies that successfully reintegrate prisoners into society. DOC operates eight adult institutions in the state and was responsible for approximately 28,213 adults in its custody as of June 2020. Approximately half of state prisoners are housed in local correctional facilities that are overseen by sheriffs. Exhibit 1 shows COVID-19 test statistics for prisoners in each state correctional facility and the number of staff who tested positive per facility.

<table>
<thead>
<tr>
<th>State Facility</th>
<th>Positive – Prisoners</th>
<th>Total Prisoners Tested</th>
<th>Percent Positive</th>
<th>Positive – Staff**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allen Correctional Center (ALC)</td>
<td>265</td>
<td>840</td>
<td>31.5%</td>
<td>34</td>
</tr>
<tr>
<td>Dixon Correctional Institute (DCI)</td>
<td>894</td>
<td>1439</td>
<td>62.1%</td>
<td>85</td>
</tr>
<tr>
<td>David Wade Correctional Center (DWCC)</td>
<td>86</td>
<td>205</td>
<td>42.0%</td>
<td>84</td>
</tr>
<tr>
<td>Elayn Hunt Correctional Center (EHCC)</td>
<td>228</td>
<td>661</td>
<td>34.5%</td>
<td>103</td>
</tr>
<tr>
<td>LA Correctional Institute for Women (LCIW)</td>
<td>386</td>
<td>530</td>
<td>72.8%</td>
<td>88</td>
</tr>
<tr>
<td>LA State Penitentiary (LSP)</td>
<td>945</td>
<td>1,942</td>
<td>48.7%</td>
<td>236</td>
</tr>
<tr>
<td>Rayburn Correctional Center (RCC)</td>
<td>130</td>
<td>1,307</td>
<td>9.9%</td>
<td>98</td>
</tr>
<tr>
<td>Raymond Laborde Correctional Center (RLCC)</td>
<td>319</td>
<td>1,393</td>
<td>22.9%</td>
<td>80</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>3,253</strong></td>
<td><strong>8,211</strong></td>
<td><strong>39.6%</strong></td>
<td><strong>808</strong></td>
</tr>
</tbody>
</table>

*DOC administered a total of 21,110 tests to 8,211 prisoners. Some prisoners were tested multiple times and some were housed at more than one facility. In addition, a prisoner could have multiple positive tests as COVID-19 tests may have been required to receive routine medical treatment at a hospital or due to surveillance testing. LSP and LCIW may include local prisoners that were housed at these facilities during the pandemic.

**As of January 19, 2021

Source: Prepared by legislative auditor’s staff using unaudited information provided by DOC.

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2 Louisiana COVID-19 Health Equity Task Force Report, June 2020
 According to the Centers for Disease Control and Prevention (CDC) guidelines, people living in correctional facilities have a greater risk of spreading COVID-19 because of their close living arrangements with others. In March 2020, the CDC released guidelines for managing the risk of spreading the virus that causes COVID-19 in correctional and detention facilities.\(^3\) According to the CDC, there are many opportunities for the virus to be introduced into environments like those in DOC correctional facilities, including by staff and outside visitors, after court appearances, and through the transfer of people between facilities. CDC guidelines for correctional/detention facilities are grouped into three stages of response: preparation, prevention, and management.

DOC has begun vaccinating staff and prisoners for COVID-19. According to DOC, as of May 4, 2021, 72% of eligible prisoners have taken dose one of the vaccine. Across all state correctional facilities, 5,910 prisoners have taken both doses of the vaccine, 7,375 prisoners have taken one dose, and 2,856 prisoners chose not to receive the vaccine. In addition, 49% of eligible staff have taken dose one of the vaccine, representing 2,162 staff, while 2,279 staff chose not to receive the vaccine.

To conduct this audit, we used guidance from the CDC and information gathered by stakeholder groups such as the Crime and Justice Institute, the Justice and Accountability Center of Louisiana, Voice of the Experienced (VOTE), and the Promise of Justice Initiative and compared these to DOC policies and to information obtained from interviews with DOC. However, because we conducted this audit during the COVID-19 pandemic, we could not perform typical audit procedures like obtaining physical evidence through facility site visits or conducting in-person interviews with management, staff, and prisoners. We were able to remotely interview management at each facility and some advocacy groups in the state. As a result, our audit scope was limited to documentary and testimonial evidence regarding DOC’s response to the pandemic.

The objective of this audit was:

**To provide information on DOC’s response to the COVID-19 pandemic in correctional facilities.**

Our results are summarized on the next page and discussed in detail throughout the remainder of the report. Appendix A is DOC management’s response, and Appendix B is our scope and methodology. Appendix C shows the number of COVID-19 tests for prisoners by facility and month, and Appendix D shows the total leave amounts used by DOC employees during the pandemic.

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\(^3\) Centers for Disease Controls and Prevention, *Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities*
Overall, DOC faced multiple issues and challenges in addressing the COVID-19 pandemic. These issues and challenges include the following:

- **DOC protocols complied with CDC guidance in the areas of testing, medical isolation, screening, visitation, personal protective equipment (PPE), social distancing, and transfers.** However, it did not have processes to verify that correctional facilities implemented these protocols. Although DOC was in regular contact with facilities, it could have implemented a process to verify that facilities were following COVID-19 protocols that did not require on-site visits. According to stakeholders, protocols may not have been uniformly implemented at all prison facilities.

- **DOC administered 21,110 COVID-19 tests to prisoners in state correctional facilities between March 2020 and January 2021. Of the 8,211 prisoners tested during that timeframe, 3,253 (39.6%) had a positive result.** However, DOC did not collect COVID-19 information, such as test results and infection rates, on state prisoners housed in local correctional facilities, even though approximately half of state prisoners are housed in these facilities.

- **DOC faced challenges in providing programming for prisoners during COVID-19 and in not allowing visitors into the facilities.** DOC experienced problems with the implementation of video visitation services, and it reported a sharp decrease in the number of education completions between April and June 2020 because programs were suspended to reduce the spread of COVID-19.

- **Out of 1,100 potential candidates, DOC furloughed 68 out of 100 prisoners approved by the Furlough Review Panel.** The panel reviewed a total of 594 prisoners and was suspended in June 2020 after Louisiana entered Phase 2 of recovery. Nationwide prison populations declined after the start of the pandemic primarily due to diversion efforts that reduced prison admissions, not releases from prisons.

- **DOC’s existing staffing challenges were exacerbated because of the increase in staff absences during the pandemic.** From March through December 2020, DOC correctional facility staff used a total of 1.5 million hours of leave, a 21.7% increase from 1.3 million the prior year. In addition, staff worked 1.2 million hours of overtime.

Our findings and our recommendations are discussed in more detail in the sections below.
DOC protocols complied with CDC guidance in the areas of testing, medical isolation, screening, visitation, PPE, social distancing, and transfers. However, it did not have processes to verify that correctional facilities implemented these protocols.

CDC guidance for correctional facilities includes various strategies for preparation, prevention, and managing COVID-19 that changed throughout the pandemic. Prior to the pandemic, DOC had a flu preparedness, response, and recovery policy that helped guide its COVID-19 response. DOC updated this policy to include influenza-like illness and pandemic viral diseases on March 10, 2020, and it issued a document entitled Screening Assessment and Infection Control FAQ and Guidance on March 18, 2020, that was distributed to all facilities. This guidance document was updated regularly throughout the pandemic as new CDC guidelines were issued. DOC was also in communication with the Louisiana Department of Health regularly.

DOC’s guidance generally complied with CDC guidance regarding COVID-19 measures. DOC’s guidance included the following recommendations:

- **Testing** - Facilities are to test any prisoner that presents signs or symptoms of an influenza like illness for both the flu and COVID-19. Facilities are also to test prisoners without symptoms for off-site trips if required by the off-site facility (hospital, court, etc.), transfers and intakes, close contact exposures, and during broad-based testing. DOC guidance also defines broad-based testing situations.

- **Medical Isolation** - Prisoners testing positive with symptoms should be medically isolated in a designated area until it has been 24 hours since resolution of fever without medication and improvement in symptoms. These prisoners, along with asymptomatic positives, should then be housed in a step-down isolation area for a minimum of 10 days. Asymptomatic close contacts are to be quarantined for a minimum of 14 days and monitored twice a day.

- **Screening** - All individuals entering a correctional facility are to have temperature checks and asked questions about potential symptoms.

- **Visitation** - All in-person visitation was prohibited. DOC initiated video calls in lieu of in-person visitation and offered additional phone calls and emails.

- **PPE** - PPE was to be distributed to staff and prisoners, including face masks. Staff were required to wear face masks while prisoners were encouraged to wear them. Each prisoner was to receive two cloth face masks.

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4 Centers for Disease Controls and Prevention, *Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities*
• **Transfers** - Transfers from one facility to another were to be restricted and required DOC approval, including state prisoners housed in local facilities.

• **Social distancing** - As social distancing is challenging in correctional facilities, housing units were to be kept separate from each other. High risk populations, such as the dialysis unit, were to remain quarantined from other housing units.

While DOC headquarters regularly disseminated updated guidelines and communicated with wardens at each state correctional facility, it did not have a process to ensure that each facility followed these guidelines. DOC’s COVID-19 guidance document was updated 18 times throughout the pandemic. According to DOC, headquarters was in contact with the wardens of each facility weekly. In addition, at DOC’s request, the CDC sent a team to tour Louisiana State Penitentiary in person to review DOC’s pandemic measures, and according to DOC, the CDC approved of DOC’s COVID-19 response. However, while DOC headquarters communicated regularly with each facility, it did not have any procedures to verify whether COVID-19 guidance was correctly and consistently implemented in each facility.

DOC could have implemented a process to verify that facilities were following COVID-19 protocols that did not require on-site visits. For example, it could have required that facilities maintain logs detailing screening of staff or cleaning and sanitizing logs that headquarters could have reviewed for compliance and consistency. In addition, DOC could have reviewed surveillance videos to determine whether staff were following guidelines, such as staff wearing PPE and housing dorms remaining separate from each other. For example, the U.S. Department of Justice Office of Inspector General conducted virtual inspections of federal prisons that included staff surveys and implementing a complaint hotline for prisoners, staff, and other parties, in addition to conducting calls with facility wardens.

Due to COVID-19 restrictions, we were unable to conduct site visits at each facility to interview prisoners and staff and review records. However, based on our interviews with stakeholders and review of published reports, we identified themes from various stakeholders regarding COVID-19 protocols in state facilities. For example, stakeholders reported that prisoners informed them that prison staff did not always wear face coverings, housing units were not always kept separate, and staff moved between quarantined and non-quarantined housing units. In addition, stakeholders reported that prisoners stated that they did not always have soap and other cleaning supplies, and that prisoners sometimes received disciplinary writeups when they refused to work in proximity to COVID-19 positive or symptomatic individuals.

**Recommendation 1:** DOC should develop a process to verify that facilities implement pandemic protocols. This could include activities that do not require going

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5 While the CDC toured Louisiana State Penitentiary, it did not issue a report or written statement about its observations of DOC’s pandemic response.

6 We interviewed Voice of the Experienced (VOTE), the Promise of Justice Initiative (PJI), the Justice and Accountability Center, and Dr. Andrea Armstrong. In addition, we reviewed numerous reports specific to Louisiana, including the Louisiana COVID-19 Health Equity Task Force Report, reviewed emails from over 100 offenders sent to VOTE staff, PJI’s report, “Locked in with COVID-19,” and the CDC’s May 8, 2020 Morbidity and Mortality Weekly Report on COVID-19 response in Louisiana correctional and detention facilities.
into the facility, such as reviewing videos and asking for logs or other documentation to evaluate the implementation of pandemic protocols.

**Summary of Management’s Response:** DOC disagrees with this recommendation and states that its current process to verify that facilities are implementing pandemic protocols consists of weekly Zoom meetings that DOC leadership holds with various stakeholders, including facility wardens. According to DOC, participants of these meetings review and discuss implementation of and proposed revisions to the COVID Guidelines and any other pandemic directive. DOC notes that it will incorporate COVID-19 guidelines into on-site audits and will evaluate the feasibility of the use of technology as a means of site review in the future. See Appendix A for DOC’s full response.

**DOC administered 21,110 COVID-19 tests to prisoners between March 2020 and January 2021. Of the 8,211 prisoners tested during that timeframe, 3,253 (39.6%) had a positive result. However, DOC did not collect COVID-19 information, such as test results and infection rates, on state prisoners housed in local correctional facilities, even though approximately half of state prisoners are housed in local facilities.**

DOC guidance for COVID-19 testing included testing symptomatic individuals for influenza and COVID-19, asymptomatic individuals being transferred, close contact exposures, and conducting broad-based testing, which is in line with CDC testing recommendations. DOC guidance included broad-based testing strategies, including surveillance/sample testing of prisoners and staff in individual housing units, mass testing of individual housing units, and mass testing of broader housing cohorts.

**According to DOC, it administered 21,110 COVID-19 tests to prisoners between March 2020 and January 2021.** Of the 8,211 prisoners tested during that timeframe, 3,253 (39.6%) had a positive result. As of March 2021, according to DOC, 36 prisoners and six DOC staff have died due to COVID-19. On average, prisoners that DOC tested were tested 5.1 times, and 449 (5.5%) were tested six times or more. According to DOC, prisoners may be tested multiple times to go to medical appointments, due to broad-based testing in housing units, or after a positive result. Exhibit 2 shows the number of tests DOC administered, the number of new positives, and the positivity rate by month. See Appendix C for the number of COVID-19 tests that each facility administered to prisoners by month.

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7 DOC’s COVID-19 data is unaudited data. We did not perform data reliability testing due to access limitations due to COVID-19 restrictions.
The CDC began recommending broad-based testing in congregate care settings in June 2020 in order to better gauge the prevalence of COVID-19 infections. However, correctional facilities began broad-based testing at different times throughout the pandemic, and some facilities did not implement broad-based testing until September 2020 (Raymond Laborde Correctional Center) or November 2020 (Elayn Hunt Correctional Center). See Appendix C for the number of tests each facility administered by month.

Prisoners who tested positive for COVID-19 were medically isolated, often in the Camp J housing unit at Louisiana State Penitentiary. Camp J is located at Louisiana State Penitentiary and consists primarily of disciplinary lockdown cells. It was closed in 2018 due to sub-standard conditions. According to DOC, it spent thousands of dollars to provide air conditioning and other upgrades to the unit in order to house COVID-19 positive offenders. In May 2020, the court dismissed a lawsuit against DOC regarding its use of Camp J as part of its COVID-19 response. The lawsuit sought to halt DOC transferring positive COVID-19 cases to Camp J for medical isolation. According to DOC, when a prisoner tested positive, his/her housing unit would quarantine for the CDC recommended timeframe.

Some offenders never received a COVID-19 test. From March 2020 through November 2020, there were 16,616 offenders housed in a state facility at some point, and 9,417 (56.7%) never received a COVID-19 test.

Note: Test numbers may include local prisoners that were housed at state facilities during the pandemic. Source: Prepared by legislative auditor's staff using unaudited information from DOC.
DOC did not collect COVID-19 information on testing, results, or infection prevention activities for state prisoners housed in local correctional centers. Louisiana is unique in that it relies on more than 100 local correctional facilities, overseen by sheriffs, to house state prisoners. Because state prisons are not capable of housing all those in DOC custody, the state houses approximately 13,051 (46.3%) prisoners in local jails as of June 2020 and as shown in Exhibit 3. DOC pays local facilities a per diem of $26.39 per day for each state prisoner. While DOC tracked the spread of COVID-19 in state facilities and required the approval of all transfers of state prisoners to or from local and state facilities, DOC did not collect information on test results, deaths, or positive infections for state prisoners housed in local facilities.

The Louisiana Sheriff’s Association collected and provided DOC with some statistics on the number of positive COVID-19 cases in local correctional facilities, but its statistics did not differentiate between the various types of prisoners housed locally. The Louisiana COVID-19 Health Equity Task Force surveyed all 64 Louisiana sheriffs requesting information on their COVID-19 response and only received six responses. As a result, there is a lack of information on the prevalence of COVID-19 in local correctional facilities.

According to DOC, it worked with local correctional facilities by providing guidance on testing, quarantine, isolation, vaccination, and any other issues. DOC also housed local level COVID-19 positive cases, if needed, at Louisiana State Penitentiary (males) and Louisiana Correctional Institute for Women (females). DOC provided local facilities with testing supplies if needed, and some nursing staff from DOC headquarters went to multiple local facilities to assist with mass testing. However, DOC did not collect information regarding COVID-19 tests and results for state prisoners housed in local facilities and it did not ensure that local facilities abided by CDC guidelines. While sheriffs have oversight of local facilities, they contract with DOC and must abide by Basic Jail Guidelines and other DOC requirements. It is important for DOC to ensure that state prisoners housed locally received the same level of COVID-19 precautions as those housed in state facilities, especially since approximately half of state prisoners are housed there.

**Recommendation 2:** DOC should ensure it collects pandemic-related information regarding state prisoners that are housed in local correctional centers.

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8 Local correctional facilities may house pre-trial individuals, state prisoners, local prisoners, federal prisoners, and immigration and customs enforcement (ICE) prisoners.
Summary of Management’s Response: DOC agrees with this recommendation and states that it is actively evaluating all operational procedures in light of lessons learned during the COVID-19 pandemic. The department is currently revising the Basic Jail Guidelines (BJG) so that jails which house DOC inmates will be required to provide COVID-19 related information beginning July 1, 2021. In addition, DOC is currently in discussions with the National Sheriff’s Association (NSA) regarding participation in the NSA’s project with the CDC to develop a COVID-19 monitoring project. The project will collect, analyze, and share certain health care data among cross-jurisdictional entities, the CDC, and state and local health departments. See Appendix A for DOC’s full response.

DOC faced challenges in providing programming for prisoners during COVID-19 and in not allowing visitors into the facilities. DOC experienced problems with the implementation of video visitation services, and it reported a sharp decrease in the number of education completions between April and June 2020 because programs were suspended to reduce the spread of COVID-19.

In accordance with CDC recommendations to prevent the spread of COVID-19, DOC suspended in-person visitation and volunteering and limited off-site work crews at Louisiana’s eight state-run prisons on March 12, 2020. According to DOC, to ensure prisoners had continued access to family and friends during the pandemic, it implemented expanded access to telephone services or video visitation, and permitted Certified Treatment and Rehabilitation Program (CTRP) completion via correspondence so prisoners could be awarded CTRP good-time credits.

DOC faced problems with the implementation of video visitation and prisoners did not always have access to these services. According to DOC, it offered video visitation, email messages, and two phone calls free of charge to prisoners in state facilities. However, DOC faced technical issues and broadband challenges that delayed the implementation of video visitation at some facilities and stakeholders reported that prisoners did not always have access to video visitation, which was set up in each housing unit. In addition, when prisoners were moved from one facility to another, they would have to wait to be registered into the new facility’s system before they could become eligible to use the telephone services. Stakeholders also reported that DOC did not always have a mechanism for secure communications between attorneys and prisoners. According to DOC, it worked with stakeholders to resolve attorney communication issues. On March 11, 2021, DOC announced that it would begin reinstating visitation at state prisons on March 13, 2021, and is working on plans to resume face-to-face attorney prisoner visits.

9 Initially two 15-minute calls per week, and then two 10-minute calls as of October 2020. In addition, DOC provided two free email stamps per week.
DOC reported a sharp decrease in the number of education completions between July 2019 and June 2020. On April 2, 2020, DOC ceased all education, programming, therapeutic, and other group activities. It encouraged prisoners to continue participation in CTRP programs that they could complete via correspondence so they could receive good time credit. However, according to DOC statistics, the number of education completions for the HiSET\textsuperscript{10} and post-secondary completions decreased significantly from July 2019 to June 2020 because programs were suspended to reduce the spread of COVID-19. Exhibit 4 shows the number of completions during each quarter of fiscal year 2020.

![Exhibit 4](image)

**Source:** Prepared by legislative auditor’s staff using information from DOC’s briefing book.

In addition, the number of CTRP participants and completions for basic education and college/job skills also decreased, particularly completions. CTRP credits are an important factor in prisoners earning good time credit for early release. Limiting CTRP offerings could result in incarcerated persons remaining incarcerated longer compared to prior to the pandemic. Exhibit 5 shows the CTRP participants and completions for fiscal year 2020.

<table>
<thead>
<tr>
<th>Period</th>
<th>Basic Education - Participants</th>
<th>Basic Education - Completions</th>
<th>College/Job Skills - Participants</th>
<th>College/Job Skills - Completions</th>
</tr>
</thead>
<tbody>
<tr>
<td>July-December 2019</td>
<td>2,086</td>
<td>198</td>
<td>2,720</td>
<td>1,397</td>
</tr>
<tr>
<td>January-June 2020</td>
<td>1,789</td>
<td>102</td>
<td>2,658</td>
<td>761</td>
</tr>
<tr>
<td><strong>Percent Change</strong></td>
<td><strong>-14.2%</strong></td>
<td><strong>-48.5%</strong></td>
<td><strong>-2.3%</strong></td>
<td><strong>-45.5%</strong></td>
</tr>
</tbody>
</table>

**Source:** Prepared by legislative auditor’s staff using information from DOC’s briefing book.

\textsuperscript{10} Louisiana uses the HiSET test to gain a high school equivalency diploma. The HiSET replaced the GED test.
Although it has not announced a definitive timeline for implementation, DOC is working on plans to bring back a limited number of volunteers for faith-based programming, as well as ramping up vocational and educational programs to pre-COVID-19 levels.

Out of 1,100 potential candidates, DOC furloughed 68 out of 100 prisoners approved by the Furlough Review Panel. Nationwide prison populations declined after the start of the pandemic primarily due to diversion efforts that reduced prison admissions, not releases from prisons.

While the CDC does not address reducing prison populations, best practices recommended decarceration\(^\text{11}\) as a mitigation strategy in a correctional facility’s COVID-19 response. Decarceration includes both diverting people\(^\text{12}\) from incarceration and releasing them from prisons and jails early to facilitate physical distancing and reduce the risk of transmission in correctional facilities. At least 48 states and the federal prison system adopted policies to reduce their incarcerated populations during COVID-19. These efforts included police departments issuing summons instead of making arrests for low level offenses, fast tracking parole hearings, and early release for individuals near the end of their sentence or who had pre-existing medical conditions. The Louisiana COVID-19 Health Equity Task Force found that prisons and jails had not sufficiently reduced their populations to enable social distancing or employed other basic preventative tools to combat the spread of COVID-19. The task force recommended that DOC should use all possible mechanisms, including pardons, furloughs, parole, traditional temporary release, and the COVID-19 Furlough Review Panel to decrease the population by half.

The COVID-19 Furlough Review Panel reviewed 594 of the potential 1,100 candidates for furlough. While the panel approved 100 of the 594 prisoners, DOC ultimately furloughed 68 prisoners. DOC announced the creation of the six-person COVID-19 Furlough Review Panel on April 14, 2020, to consider temporary furloughs as allowed by state law for certain nonviolent, non-sex offense prisoners within the last six months of their prison sentence. The panel was part of multi-stakeholder efforts to reduce the prisoner population in a way that maintained public safety and promoted public health. Advocacy groups stated that the criteria for consideration by the panel were too stringent and not based on prisoners’ health risks or the status of outbreaks at correctional facilities\(^\text{13}\).

The panel held 16 meetings starting on April 17, 2020, and was suspended on June 2, 2020, when the state entered Phase 2 of recovery. DOC identified 1,100 prisoners serving convictions for non-violent/non-sex crimes who were within the last six months of their prison sentence, and the panel considered 594 of the 1,100 prisoners during their 16 meetings.

\(^\text{11}\) The National Academies Press in *Decarcerating Correctional Facilities during COVID-19: Advancing Health, Equity, and Safety* defines decarceration as the practice of diverting people from incarceration and releasing them from prisons and jails.

\(^\text{12}\) Diverting individuals from prison could include the court system or law enforcement using techniques to prevent incarceration, such as pre-trial diversion or summons instead of arrests.

\(^\text{13}\) Louisiana House Committee on Administration of Criminal Justice hearing (September 2, 2020)
According to DOC, the primary reasons for denial by the panel included the prisoner’s disciplinary history, TIGER risk/needs assessment score, number of convictions, opposition by local district attorneys, law enforcement or victims, and facts pertaining to the actual crime. The panel approved 100 prisoners for temporary furlough, and DOC ultimately released 68 of the 100 prisoners on temporary furlough. The reasons why the remaining 32 prisoners were not furloughed include detainers not clearing, out of state residences, prisoners declining furlough, and prisoners reaching their ordinary release date.

According to DOC, approximately 8,993 fewer people were in Louisiana prisons and jails as of September 2020 due to factors such as fewer individuals incarcerated while awaiting trial, probation and parole detainers removed, and generally fewer individuals incarcerated in jails and prisons. Similar to in Louisiana, prison populations nationwide declined after the start of the pandemic in March 2020 primarily through diversion from prison rather than releasing prisoners. According to analysis by the Marshall Project and the Associated Press, there was an 8% reduction in prison populations in the U.S. between March and June 2020, and the Prison Policy Initiative found that there was a 17% average reduction in state prison populations from January 1, 2020, to January 22, 2021. Both reports found that the reductions were not due to states’ efforts to release people from prison but rather due to intentional diversion efforts such as reduced prison admissions, court closures causing fewer people receiving sentences, and parole officers sending fewer people to prison for low-level violations.

DOC’s existing staffing challenges were exacerbated because of the increase in staff absences during the pandemic. From March through December 2020, DOC correctional facility staff used a total of 1.5 million hours of leave, a 21.7% increase from 1.3 million the prior year. In addition, staff worked 1.2 million hours of overtime.

Before the COVID-19 pandemic, DOC faced staffing shortages and corrections officers routinely worked extra shifts to cover staffing needs. DOC was among the top five state agencies with overtime expenditures during fiscal years 2013 through 2020 and according to DOC, difficulty in recruiting staff to fill vacant positions in its security ranks is a significant factor in its overtime expenditures. These shortages were further exacerbated during the COVID-19

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14 The Targeted Interventions Gaining Enhanced Re-entry (TIGER) risk/needs assessment tool determines what deficits exist for an offender that may cause return to prison such as mental health issues, substance abuse issues or other criminogenic needs. This tool can help determine who is at higher risk of return to incarceration and then guide placement/classification and programs designed to reduce recidivism.

15 The prisoner’s temporary release would terminate on the date of the assigned Good Time Parole Supervision release date, the date of release assigned by the Parole Board, or full-term date, whichever was earlier, at which point the prisoner would transition into parole supervision or have completed their sentence.

16 Based on Prison Policy Initiative’s analysis “How Much Have COVID-19 Releases Changed Prison and Jail Populations?” (February 3, 2021) using data from 30 states’ Departments of Correction or the Vera Institute of Justice from January 2020 to January 2021.

17 http://app.la.state.la.us/PublicReports.nsf/0/6423FC6A80E54A168625865C007B4AB4/$FILE/00022507B.pdf?OpenElement&.7773098
pandemic as staff were often absent from work due to illness, the need to quarantine, or care for a family member who was quarantined.\footnote{CDC guidance has changed over the course of the pandemic regarding how long individuals must quarantine before returning to work. DOC’s policy regarding staffing absences is in line with CDC guidance, which recommends staff with positive test results or who was exposed to a positive case to quarantine at home for a certain time frame.}

While overall DOC turnover in state corrections facilities was 37.9\% on average during fiscal years 2019 and 2020, entry level corrections officer positions, such as cadets and sergeants, had much higher turnover. The corrections cadet position had 192.7\% turnover, on average, for fiscal years 2019 and 2020, and the corrections sergeant position had 53.7\% average turnover during this timeframe. Exhibit 6 shows the turnover rate and average number of positions for corrections officers working in state correctional facilities for fiscal years 2019 through 2020. In addition, in September 2020 there were 91 fewer corrections officer positions filled than in June 2020. DOC has been working on obtaining additional funding to raise the base pay for corrections officers. Staffing shortages and frequent turnover can affect the overall safety of correctional facilities for both staff and prisoners.

From March through December 2020, DOC correctional facility staff used a total of 1.5 million hours of leave and worked 1.2 million hours of overtime. Total leave usage by DOC prison staff increased by 21.7\% between March – December 2019 and March – December 2020, from 1.3 million hours of leave to 1.5 million hours of leave, while overtime usage was similar to the prior year. The largest increase in leave usage during this timeframe was 80.2\% at Allen Correctional Center, from 31,463 hours to 56,682 hours of leave. As infections among prison staff increased between March through December 2020, leave usage by correctional facility staff increased due to sickness or to quarantine or care for family members. This was accompanied by an increase in the use of overtime by correctional facility staff to cover for staff absences. DOC leadership also supplemented staffing levels by reassigning some probation and parole officers to provide sit-down coverage for hospitalized prisoners, cover some shifts at Camp J, and cover some night shifts at the Louisiana Correctional Institute for Women. Exhibit 7 shows the total hours of leave and overtime used per month. See Appendix D for the number of leave hours taken by staff per facility and the total leave taken by type.
Exhibit 7
Total Leave and Overtime Usage by Correctional Facility Staff in Hours
March-December 2020

Source: Prepared by legislative auditor’s staff using Business Objects reports
APPENDIX A: MANAGEMENT’S RESPONSE
June 15, 2021

Michael J. "Mike" Waguespack, Legislative Auditor
Louisiana Legislative Auditor’s Office
Post Office Box 94397
Baton Rouge, LA 70804

Dear Mr. Waguespack,

Please accept this letter as the Department of Corrections’ (DOC) response to the recommendations in the recent performance audit report on the Response to the COVID-19 Pandemic in correctional facilities.

The Covid-19 global pandemic brought with it a unique set of challenges that thrust Corrections agencies across the country into unchartered territory. In March of 2020, the Department of Corrections took aggressive measures to protect the health and wellbeing of inmates and staff and to proactively reduce the risk of COVID-19. This comprehensive response deployed unprecedented and sweeping operational measures which included the suspension of all in-person visitation and programming in state prisons, strenuous restrictions on transfers into state prisons, and the imposition of Reverse Isolation housing units as a prevention measure to protect at-risk inmates. For a more in depth list of these measures see: https://s32082.pcdn.co/wp-content/uploads/2020/12/DOC-Summary-of-COVID-19-Response-for-WEBSITE-12.2.20.pdf

I remain inspired by the strength and resilience on display in every corner of our Department. From our front line correctional staff who attend to our population 24-hours a day, to our health care professionals on the front lines testing for the virus and providing vaccinations, all while continuing to provide the excellent health care that patients require under normal circumstances. From our Probation and Parole agents who stepped up to provide support at the prisons and offsite hospital trips, to our administrative staff and leadership team located Headquarters and across the state who keep this Department running, to the inmates in our facilities who have shown incredible patience, resilience, and empathy despite having not been able to see loved ones in-person for nearly a year. Taken together, this extraordinary mobilization has and will continue to reduce risk and to save lives.
Recommendation 1: DOC should develop a process to verify that facilities implement pandemic protocols. This could include activities that do not require going into the facility, such as reviewing videos and asking for logs or other documentation to evaluate the implementation of pandemic protocols.

Management Response: From March 2020 through the present, all state facilities were and are required to provide daily COVID-19 numbers related to testing, test results, and vaccinations. From March 2020 through the present, the Secretary held and holds weekly (MWF until fall of 2020) deliberative process Zoom meetings regarding the Department’s COVID-19 Pandemic response. Present for the COVID calls are, among others, the Secretary and the Department’s Leadership Team (Under, Asst. Sec., DASs, Med/MH/Nursing HQ, Legal, Data, Reentry, State Police, P&P, Executive Counsel); Facility Wardens/Leadership Teams (including facility medical/mental health/nursing directors); and a representative from the Louisiana Sherriff’s Association. During the COVID calls, each facility Warden presents a status update regarding their respective facility which includes, among other things, a review of covid-19 numbers and the ongoing implementation of current COVID-19 protocols. Furthermore, the purpose of these weekly calls is to provide assistance and support as needed to maintain compliance with all federal, state, and Department directives for mitigating the pandemic’s effects upon the inmates and staff. Additionally, all present review and discuss implementation of and proposed revisions to the COVID Guidelines or any other pandemic directive in order to enhance measures to stop the spread and to protect the inmates, staff, and the public. DOC continues to work closely with the Louisiana Department of Hospitals (LDH) regarding any changes made to medical isolation, quarantine, testing, vaccination protocols etc.

The Department will continue to use the above referenced measures to verify implementation of pandemic protocols. In addition to these, the Department will incorporate the COVID-19 guidelines into on site audits conducted by HQ in order to further ensure the uniform implementation of COVID-19 protocols. Furthermore, the Department will evaluate the feasibility of the use of technology as a means of site review should on-site review become restricted again in the future.

Recommendation 2: DOC should ensure it collects pandemic-related information regarding state prisoners that are housed in local correctional centers.

Management Response: The Department is actively evaluating all operational procedures in light of lessons learned over the past year. The Department is currently revising the Basic Jail Guidelines (BJG) to include COVID-19 related information. Specifically, jails which house DOC inmates will be required to provide the following:

1. Number of individuals housed for DPS&C who are currently positive on the reporting date.
2. Number of individuals housed for DPS&C who have a pending COVID tests on the reporting date.
3. Number of individuals housed for DPS&C who are vaccinated on the reporting date.

These reporting requirements will become effective July 1, 2021.

Furthermore, the Department is currently in discussions with the National Sheriffs’ Association (NSA) regarding the Department’s participation in the NSA’s project with the Centers for Disease Control and Prevention (CDC) to develop a COVID-19 Monitoring Pilot Project and System for U.S. Correctional and Detention Facilities. The purpose of this project is to implement the pilot in conjunction with other agencies in the State of Louisiana to collect, analyze and share certain health care data and information about individuals in their care and custody and COVID-19-related information. Specifically, the NSA, in collaboration with the LADPSC and the CDC, will create real-time data integration between the required data in detention and corrections facilities’ jail management systems, and the current healthcare and medical system uses, to securely capture, validate, and communicate COVID-19 data and information among cross-jurisdictional entities, CDC, state, and local health departments. This data and information will enable analysis and secure communication of COVID-19 prevention information and data. This data system will provide the information and data needed by cross-jurisdictional jails and prisons, CDC, state, and local health departments to help reduce morbidity and mortality.

**Additional Points of Clarification:**

**Broad Based Testing:** All symptomatic and asymptomatic testing protocols were implemented in consultation with LDH. In addition to testing all symptomatic inmates, the Department implemented and established a feasible protocol for broad-based testing of inmates and staff in order to proactively identify asymptomatic cases and further reduce the spread of COVID-19. This protocol takes into account the uniqueness of correctional congregate settings and the spatial confines, security requirements and staffing shortages that often do not exist in non-corrrectional congregate settings such as nursing homes.

**Access to Phone calls, Email, and Video Visitation:** The DOC suspended visitation on March 12, 2020, to mitigate the spread of COVID-19 and protect staff and inmates at the state’s institutions. In order to ensure that inmates had continued connection to family and friends during the suspension the Department provided per week, 2 free phone calls and 2 free emails to every inmate. In addition to this, the Department implemented the use of video visitation platforms in all state facilities. Initial band-width delays were present due to the simultaneous rollout of the same platform in many other corrections facilities nationwide.
In closing, I would like to express my gratitude to your staff for their professionalism throughout this audit process. Please do not hesitate to contact me if you have any questions or require additional information.

Sincerely

[Signature]

James M. LeBlanc
Secretary
Agency: Department of Corrections

Audit Title: Response to the COVID-19 Pandemic in Correctional Facilities

Audit Report Number: 40200023

Instructions to Audited Agency: Please fill in the information below for each recommendation. A summary of your response for each recommendation will be included in the body of the report. The entire text of your response will be included as an appendix to the audit report.

Finding 1: DOC protocols complied with CDC guidance in the areas of testing, medical isolation, screening, visitation, PPE, social distancing, and transfers. However, it did not have processes to verify that correctional facilities implemented these protocols.

Recommendation 1: DOC should develop a process to verify that facilities implement pandemic protocols. This could include activities that do not require going into the facility, such as reviewing videos and asking for logs or other documentation to evaluate the implementation of pandemic protocols.

Does Agency Agree with Recommendation? [ ] Agree [x] Disagree

DOC Disagrees in part/does not agree that a process for verifying implementation does not exist (see response letter).

Agency Contact Responsible for Recommendation:
Name/Title: Natalie LaBorde, Exec Counsel and Seth Smith, Chief of Operations
Address: 504 Mayflower Street
City, State, Zip: Baton Rouge, La
Phone Number: 225 342 8131
Email: Natalie.laborde@la.gov, Seth.smith@la.gov

Finding 2: DOC administered 21,110 COVID-19 tests to prisoners from March 2020 through January 2021. Of the 8,211 prisoners tested during that time frame, 3,253 (39.6%) had a positive result. However, DOC did not collect COVID-19 information such as test results and infection rates on state prisoners housed in local correctional facilities, although approximately half of state prisoners are housed in local facilities.

Recommendation 2: DOC should ensure it collects pandemic-related information regarding state prisoners that are housed in local correctional centers.

Does Agency Agree with Recommendation? [x] Agree [ ] Disagree
Agency Contact Responsible for Recommendation:

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Angela Whittaker, Executive Management Advisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>604 Mayflower Street</td>
</tr>
<tr>
<td>City, State, Zip</td>
<td>Baton Rouge, LA</td>
</tr>
<tr>
<td>Phone Number</td>
<td>225 3421597</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:Angela.Whittaker@la.gov">Angela.Whittaker@la.gov</a></td>
</tr>
</tbody>
</table>
APPENDIX B: SCOPE AND METHODOLOGY

This report provides the results of our performance audit of the Department of Public Safety and Corrections (DOC). We conducted this performance audit under the provisions of Title 24 of the Louisiana Revised Statutes of 1950, as amended. This audit covered March 2020 through March 2021. Our audit objective was:

To provide information on DOC’s response to the COVID-19 pandemic in correctional facilities.

Because this audit occurred during the COVID-19 pandemic, we could not perform typical audit procedures such as obtaining physical evidence by conducting site visits of state correctional facilities or in-person interviews with prisoners and staff. As a result, our audit scope was limited to DOC’s COVID-19 protocols, rather than DOC’s implementation of these protocols. We conducted this performance audit in accordance with generally accepted Government Auditing Standards issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide reasonable basis for our findings and conclusions based on our audit objective. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective. To answer our objective, we reviewed internal controls relevant to the audit objective and performed the following audit steps:

• Researched and reviewed CDC guidelines related to COVID-19, including CDC guidelines for correctional facilities.

• Interviewed stakeholder groups such as the Justice and Accountability Center of Louisiana, Voice of the Experienced (VOTE), and the Promise of Justice Initiative.

• Reviewed emails from more than 100 offenders sent to VOTE staff, as well as letters of appreciation from prisoners and families sent to DOC.

• Reviewed the Louisiana COVID-19 Health Equity Task Force Report.

• Obtained documentation regarding DOC’s COVID-19-related lawsuits and the final rulings of the court, which dismissed the cases.

• Obtained DOC’s COVID-19 policies and guidance relative to state correctional facilities.

• Compared DOC’s COVID-19 guidance to CDC guidance.
• Interviewed DOC management regarding its COVID-19 response. Conducted phone calls with wardens and other staff at each state facility to understand COVID-19 protocols in the facilities.

• Obtained and analyzed DOC prisoner COVID-19 tests, test dates, and results from DOC management, and obtained statistics on staff who tested positive for COVID-19. We did not conduct reliability on this dataset due to COVID-19 limitations.

• Obtained staffing reports from Business Objects, including employee listings, turnover, and employee leave reports to analyze staffing challenges related to COVID-19. We examined employee turnover for fiscal years 2019 and 2020. We also determined the hours of leave taken and overtime worked by DOC prison employees from March 2019 through December 2019 and March 2020 through December 2020.
  • LaGov leave types included annual leave, sick leave, leave without pay, sick leave for immediate family etc., and also special leave such as public health leave, quarantine leave, and Act of God leave.
  • LaGov overtime codes included evaluated and override codes.

• Provided our results to DOC to review for accuracy and reasonableness.
## APPENDIX C: TOTAL TESTS FOR PRISONERS AND STAFF BY FACILITY

Tests Administered to Prisoners by Facility  
March 2020 through January 2021

<table>
<thead>
<tr>
<th>Test Date</th>
<th>ALC</th>
<th>DCI</th>
<th>DWCC</th>
<th>EHCC</th>
<th>LCIW</th>
<th>LSP</th>
<th>RCC</th>
<th>RLCC</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 2020</td>
<td>16</td>
<td>18</td>
<td>2</td>
<td>4</td>
<td>3</td>
<td>34</td>
<td>13</td>
<td>9</td>
<td>99</td>
</tr>
<tr>
<td>April 2020</td>
<td>8</td>
<td>19</td>
<td>8</td>
<td>24</td>
<td>278</td>
<td>322</td>
<td>77</td>
<td>13</td>
<td>749</td>
</tr>
<tr>
<td>May 2020</td>
<td>3</td>
<td>8</td>
<td>22</td>
<td>44</td>
<td>526</td>
<td>468</td>
<td>81</td>
<td>42</td>
<td>1,194</td>
</tr>
<tr>
<td>June 2020</td>
<td>2</td>
<td>3</td>
<td>19</td>
<td>27</td>
<td>175</td>
<td>867</td>
<td>37</td>
<td>13</td>
<td>1,143</td>
</tr>
<tr>
<td>July 2020</td>
<td>1,116</td>
<td>9</td>
<td>24</td>
<td>28</td>
<td>26</td>
<td>689</td>
<td>17</td>
<td>29</td>
<td>1,938</td>
</tr>
<tr>
<td>August 2020</td>
<td>883</td>
<td>1,425</td>
<td>52</td>
<td>37</td>
<td>1,169</td>
<td>1,269</td>
<td>29</td>
<td>4,876</td>
<td></td>
</tr>
<tr>
<td>September 2020</td>
<td>1</td>
<td>1,183</td>
<td>62</td>
<td>32</td>
<td>12</td>
<td>795</td>
<td>10</td>
<td>1,583</td>
<td>3,678</td>
</tr>
<tr>
<td>October 2020</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>63</td>
<td>13</td>
<td>396</td>
<td>7</td>
<td>1,926</td>
<td>2,413</td>
</tr>
<tr>
<td>November 2020</td>
<td>0</td>
<td>19</td>
<td>5</td>
<td>617</td>
<td>12</td>
<td>59</td>
<td>8</td>
<td>91</td>
<td>811</td>
</tr>
<tr>
<td>December 2020</td>
<td>60</td>
<td>110</td>
<td>21</td>
<td>790</td>
<td>25</td>
<td>164</td>
<td>96</td>
<td>52</td>
<td>1,318</td>
</tr>
<tr>
<td>January 2021</td>
<td>171</td>
<td>360</td>
<td>58</td>
<td>208</td>
<td>106</td>
<td>387</td>
<td>1,567</td>
<td>34</td>
<td>2,891</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2,263</td>
<td>3,157</td>
<td>275</td>
<td>1,874</td>
<td>1,188</td>
<td>5,350</td>
<td>3,182</td>
<td>3,821</td>
<td>21,110</td>
</tr>
</tbody>
</table>

**Total Staff Positives**: 34  85  84  103  88  236  98  80  808

**Prison Capacity***: 833  1,800  1,224  1,975  600  5,815  1,314  1,808  15,369

*Prison capacity is the number of beds available at each facility. It is not the total number of prisoners that were housed in each facility. Prisoners may be transferred to multiple facilities during their time incarcerated.

**Source**: Prepared by legislative auditor’s staff using unaudited information provided by DOC.
## APPENDIX D: STAFF LEAVE USAGE

### Total Hours of Leave Used by DOC Prison Staff
March-December 2019 and March-December 2020

<table>
<thead>
<tr>
<th>DOC Personnel Area</th>
<th>2019</th>
<th>2020</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Louisiana State Penitentiary</td>
<td>513,394</td>
<td>608,328</td>
<td>18.49%</td>
</tr>
<tr>
<td>Elayn Hunt Correctional Center</td>
<td>199,403</td>
<td>238,779</td>
<td>19.75%</td>
</tr>
<tr>
<td>Dixon Correctional Institute</td>
<td>152,339</td>
<td>175,515</td>
<td>15.21%</td>
</tr>
<tr>
<td>Raymond Laborde Correctional Center</td>
<td>85,061</td>
<td>127,910</td>
<td>50.37%</td>
</tr>
<tr>
<td>Rayburn Correctional Center</td>
<td>108,180</td>
<td>126,252</td>
<td>16.71%</td>
</tr>
<tr>
<td>Louisiana Correctional Institute for Women</td>
<td>94,184</td>
<td>107,144</td>
<td>13.76%</td>
</tr>
<tr>
<td>David Wade Correctional Center</td>
<td>77,722</td>
<td>95,171</td>
<td>22.45%</td>
</tr>
<tr>
<td>Allen Correctional Center</td>
<td>31,463</td>
<td>56,682</td>
<td>80.15%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,261,746</strong></td>
<td><strong>1,535,781</strong></td>
<td><strong>21.7%</strong></td>
</tr>
</tbody>
</table>

**Note:** These totals include all types of leave taken by employees.

**Source:** Preprared by legislative auditor's staff using Business Objects reports.

### Leave Usage Hours by DOC Prison Staff
March-December 2019 and March-December 2020

<table>
<thead>
<tr>
<th></th>
<th>Sick leave</th>
<th>Special leave</th>
<th>Annual leave</th>
<th>FMLA</th>
<th>Leave without pay</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>238,410</td>
<td>63,254</td>
<td>406,474</td>
<td>290,991</td>
<td>54,774</td>
<td>207,843</td>
</tr>
<tr>
<td>2020</td>
<td>284,214</td>
<td>321,455</td>
<td>338,442</td>
<td>313,687</td>
<td>56,383</td>
<td>221,600</td>
</tr>
</tbody>
</table>

**Source:** Prepared by legislative auditor’s staff using Business Objects reports.