

**NEW YORK CITY
BOARD OF CORRECTION**

March 11, 1998

MEMBERS PRESENT

John R. Horan, Acting Chair
Canute C. Bernard, M.D.
Louis A. Cruz
David Lenefsky
David A. Schulte

Excused absences were noted for Members Peter J. Johnson, Jr., Stanley Kreitman, and Barbara Margolis.

DEPARTMENT OF CORRECTION

Bernard Kerik, Commissioner
Gary Lanigan, First Deputy Commissioner
Tom Antenen, Deputy Commissioner
Antonio Figueroa, Deputy Commissioner
Elizabeth Loconsolo, Esq., General Counsel
Roger Jefferies, Assistant Commissioner
Roger Parris, Assistant Commissioner
Robert Ortiz, Assistant Chief

HEALTH AND HOSPITALS CORPORATION - CORRECTIONAL HEALTH SERVICES

Gregory Kaladjian, Executive Director
Art Lynch, Director, Mental Health

OTHERS IN ATTENDANCE

Martha Calhoun, Esq., NYC Law Department
Tracie Lucas, State Commission of Correction
Milton Zelenmeyer, Legal Aid Society, Prisoners' Rights Project

Acting Chair John Horan called the meeting to order at 1:05 p.m. He congratulated the staff for obtaining new furniture for the Board's conference room.

Executive Director Richard Wolf introduced Anthony LaGasse, the Board's new Director of Information Services.

A motion to approve the minutes from the February 11, 1998 Board meeting was approved by all Members present. Acting Chair Horan then called for reports the Members.

Board Member David Schulte reported on his return visit to the Substance Abuse Intervention Division (SAID) program at the Rose M. Singer Center (RMSC). He said he was impressed with the participants' determination to stop using drugs, and with the program itself. Mr. Schulte said that the participants asked for "inspirational" literature from Narcotics Anonymous and other sources. Mr. Schulte reported that five of the seven toilets in the Sprung dormitory were stopped up, and that he was told no plumbers were available to unclog the toilets. Mr. Schulte asked for a plunger, and was told that inmates were not allowed to unclog toilets because the plumbers would go on strike, and that correction officers would also strike if they were told to unclog the toilets. He suggested that the Department re-negotiate labor contracts to allow inmates to perform this task. Mr. Schulte reported a second bathroom problem: the shower heads were installed improperly. Water cascades onto tile floors, causing tiles to come up and exposing the plywood, which begins to rot.

Commissioner Bernard Kerik responded that the issue of keeping a plunger in the housing area would be taken up with security personnel. He noted that a major shower replacement project was underway for Sprungs and modular housing areas. Deputy Commissioner Antonio Figueroa added that Mr. Schulte's assessments were correct, and that the

shower heads had been installed improperly.

start
Board Member David Lenefsky thanked Gregory Kaladjian, Executive Director of HHC's Correctional Health Services, for arranging for St. Barnabas to fund a mental health center for female inmates. Mr. Lenefsky then said he would raise several issues that were presented in a recent article in the *New York Times*. He noted that DOC staff, as well as several inmates in the AIDS dorm at North Infirmery Command (NIC), and at the Rose M. Singer Center (RMSC) raised two issues during his tour last week, with Deputy Executive Director Cathy Potler. (Mr. Lenefsky added that the tour occurred before the *Times* article was published.) The issues are:

- the number of medical personnel appears to have been reduced from levels in place when Montefiore had the contract
- a new procedure has been implemented requiring approval of an "urgi" doctor before medical staff may move an inmate to a hospital

Mr. Lenefsky asked for a written comparison of Montefiore's and St. Barnabas' provider staffing. He asked that March 1997 levels be compared to March 1998 levels, at all facilities on all tours.

Mr. Kaladjian said that he and his staff have met with senior St. Barnabas officials on various quality assurance issues. He said that, in particular, RMSC issues and HIV care have been subjects raised at these discussions, and that Dr. Gade, President of St. Barnabas, is interceding directly. Mr. Kaladjian said that St. Barnabas had just hired a new personnel director for the Rikers Island program, and this should speed the hiring process. He added that he will provide Mr. Lenefsky with the analysis he seeks. Mr. Kaladjian said that the new hospital-transfer protocol is designed to provide more accurate triaging, and that the presence of more emergency-trained physicians on Rikers Island allows for fewer hospital runs because some

procedures (including suturing) now can be performed on Rikers Island. He noted, however, that quality assurance checks will continue to be performed to ensure that cases that should be sent to a hospital are sent in a timely fashion.

Mr. Kaladjian reported that St. Barnabas' data collection techniques are sophisticated, and will allow CHS to perform proper contract monitoring for the first time. He said this was not possible in the past, so it is difficult to compare current performance to performance under the Montefiore and St. Vincent's contracts. Mr. Kaladjian stated that CHS has established a five-person contract monitoring unit to evaluate program service delivery only - spending issues are monitored separately.

Mr. Lenefsky said that after he reviews the written comparison, he would like to visit the facilities, with Dr. Bernard and with BOC staff, together with Mr. Kaladjian and his staff. Board Member Dr. Canute Bernard said that he was very interested in seeing St. Barnabas' facilities, and in particular, the urgi center.

Mr. Lenefsky said that at RMSC, in Dorm Upper 9, the temperature in this mental health unit was much too high. Also, the space for mental health staff at RMSC is inadequate, and there is no fresh air. Commissioner Kerik said that the temperatures were checked, at they were between 75 and 78 degrees. Ms. Potler suggested that these readings might have been obtained after Mr. Lenefsky asked that the temperature be lowered. She urged Commissioner Kerik to have officers in mental observation housing areas monitor temperatures carefully because of the health risk of excessive heat to inmates who are taking psychotropic medications.

Mr. Lenefsky referred to a February 25th letter to Ms. Potler regarding plans by DOC and CHS to revise enhanced suicide watch procedures, and asked if progress had been made. CHS

Mental Health Director Arthur Lynch reported that policies and procedures are being revised. He said that "enhanced" watches involved both observing the inmate and housing him/her in specially designated cells or dormitory beds nearest to the officers' station. He added that CHS's revisions were being reviewed by DOC because they will make certain "staffing demands" on DOC. Mr. Lynch said he expects this issue will be resolved soon.

Mr. Lenefsky reminded the Department that the Mental Health Minimum Standards require continuing mental health education and training for officers. Commissioner Kerik said he has just promoted Deborah Kurtz to Deputy Commissioner. Ms. Kurtz will take over responsibility for the training academy, with specific responsibility for revising mandated training and training in sound correctional practices. The Commissioner added that he knew that some mental health areas were staffed by officers who were not adequately trained, and already had stepped up training efforts.

Mr. Wolf asked Mr. Kaladjian whether, during the quality assurance chart reviews, he and his staff had identified and brought to St. Barnabas' attention specific cases that illustrated the issues raised by Mr. Lenefsky. Mr. Kaladjian said that he had, and that St. Barnabas was required to respond to CHS by advising it of the corrective actions it takes.

Mr. Schulte asked about an inmate at RMSC whom he observed in restraints, yelling at and insulting a deputy warden. The deputy warden had told Mr. Schulte that the inmate was being returned to punitive segregation. Mr. Schulte said the woman seemed to have mental problems, and asked how one determines whether such an inmate should be in mental health housing or in punitive segregation? Mr. Lynch said that when someone is suffering from a psychosis that can be treated with psychotropics, the inmate will be housed in the mental

observation unit unless her behavior is so disruptive that she cannot be managed, in which case she would be sent to Elmhurst hospital to be restrained and/or to receive medication over objection. If however, an inmate strikes an officer and the inmate has no psychosis or no mental illness that can be treated with medication, the inmate is sent to punitive segregation if "cleared" for the bing by a psychiatrist. Mr. Lynch noted that a doctor makes bing rounds every day, and if the doctor observes an inmate who exhibits mental health symptoms, the doctor will refer the inmate to mental health services for evaluation. The inmate will then be placed in whatever level of care is required, including Elmhurst (or Bellevue) Hospital, the Bronx HDM Assaultive Unit, a mental observation unit, or the bing.

Ms. Potler asked why the number of hospital runs had decreased so much. Mr. Kaladjian said that this was primarily attributable to direct emergency intervention by urgi-care doctors on Rikers Island; many inmates who refused to take medications were convinced to do so on Rikers Island, rather than at a hospital. Mr. Lynch added that there had been meetings among CHS staff, St. Barnabas staff, and the staffs of the hospital-based forensic services to discuss the referral process. He said it will take two to three months from now before St. Barnabas is able to best determine "the line" differentiating cases for which hospital referrals are appropriate or not. He added that St. Barnabas was sending more women than men to hospitals for mental illness. Mr. Lenefsky said this confirmed his observation that female inmates now exhibited more mental illness symptoms than in the past, and Mr. Lynch agreed.

In response to a question from Ms. Potler, Mr. Lynch said providers were relying upon Thorazine and Haldol. Mr. Lynch acknowledged that dosages had been increased, but only to the point where inmates are still functioning.

Acting Chair Horan asked for information about the new mental health punitive segregation unit (MHPSU). Mr. Kaladjian said the MHPSU will be funded beginning July 1, 1998. He distributed copies of a proposal that was submitted to OMB. Mr. Lynch then reviewed the document (copy attached). He said that the primary purpose of the unit is to prevent CPSU inmates from avoiding having to complete their "bing time" by feigning mental illness and being placed in MOUs where they can "prey on the mentally ill". Mr. Lynch said the secondary purpose will be to provide treatment for those inmates who are mentally ill, and to place them on a waiting list for MOU housing.

Ms. Potler asked if what was contemplated were referrals from CPSU directly into the MHPSU. Mr. Lynch said Ms. Potler was correct, and that the unit would be located at the George R. Vierno Center (GRVC). As a pilot project, it will have 16 beds; plans call for expanding to as many as 62 beds, as needed. General Counsel Elizabeth Loconsolo said that the pilot will begin by accepting only CPSU detainees; thereafter, it will accept inmates from MOUs. Ms. Potler asked if her understanding was correct that when an inmate completed his bing time, the inmate would be released from the MHPSU. Commissioner Kerik said that when an inmate completes a bing sentence, the inmate will be removed from the MHPSU. Ms. Potler said this means that should such an inmate have a diagnosis of psychosis, the inmate will be housed in C-71 or whichever location is most appropriate to the mental health diagnosis. Mr. Lynch agreed.

Dr. Bernard asked how the unit's procedures and methodologies would be evaluated. Mr. Lynch said that a program evaluation design was planned. Data will be collected on all cases and evaluated at six month and one-year intervals to evaluate the size of the unit and to assess which services are effective and which are not.

Mr. Lenefsky asked about efforts to train staff at RMSC on methadone issues. Mr. Lynch said that Dr. Burgess, St. Barnabas' mental health director, had agreed to provide training to RMSC staff. Dr. Burgess will determine the extent to which methadone issues training is needed in other facilities and provide it wherever necessary, perhaps via a videotaped presentation. Ms. Potler asked if the training would include sensitizing doctors to the issue of dosage level - inmates often complain that the dosage level does not block their craving. Ms. Potler said she was less concerned about methadone maintenance areas (KEEP program) and more concerned about the detox areas. Mr. Lynch said detox was accomplished by progressively reducing the methadone dosage; he said he would raise the issue with Dr. Burgess. Finish

Mr. Lenefsky asked if the Sugrue suicide follow-up to the Prison Death Review Board meeting had been concluded by DOC. Commissioner Kerik said that it had, and that two officers had been charged. Mr. Lenefsky asked about procedural changes; Ms. Potler identified suicide watch procedures and mental health referral procedures as two areas about which the Board had particular concerns. Assistant Chief Robert Ortiz said that meetings had occurred, and changes should be finalized by the April BOC meeting.

Mr. Wolf reported that BOC staff had received many complaints from State prisoners being housed on Rikers Island pursuant to a contract between NYCDOC and NYS Department of Correctional Services. The inmates claimed they were not being told about their status as "contract" inmates, were being given no explanations as to why they were being kept in City jails, and were not being told how the "contract" time would affect their State time and eligibility for parole. Commissioner Kerik said that there had been no protocol to advise State inmates that they were remaining on Rikers Island. A protocol will be developed. The Commissioner said

that many State inmates would rather stay on Rikers Island, close to family, than go to a far-away State prison. Therefore, all "contract" inmates will be told that misbehavior will result in immediate transfer to State prison. As to programs and services, Commissioner Kerik said "contract" prisoners would receive all opportunities they receive as State-ready inmates. Mr. Wolf said the inmates were concerned about how the Parole Board would view their up-to six months "contract" time, given that during the "contract" period the inmate could not participate in a Parole Board-approved program offered only in State prison. Commissioner Kerik said that the fact that an inmate is selected to be a contract inmate will be seen by Parole as a positive statement about the inmate.

Ms. Potler reported that at ARDC a 19-year old inmate was found in a bathroom in Mod 10 having a seizure. Resuscitation efforts were ultimately unsuccessful, and the inmate died at the hospital. Ms. Potler asked if DOC or CHS representatives had additional information. Commissioner Kerik said the matter is under investigation. A cause of death has been determined and the matter has been referred to the Police Department. Mr. Lenefsky asked if the response time of medical personnel was an issue. Commissioner Kerik said it was not an issue.

Acting Chair Horan asked if there were plans to house juveniles from the Department of Juvenile Justice (DJJ) in City jails. Commissioner Kerik said DOC may help DJJ when it vacates Spofford and occupies new facilities. DJJ may require as many as 100 additional beds. The Commissioner added that the Bain Barge was the location that DOC might make available.

Mr. Schulte raised the issue of the teacher who was grabbed by an inmate-student. Commissioner Kerik said he did not want to post an officer in each classroom, as this might interfere with teaching. However, DOC is reviewing supervision procedures and incident

notification procedures as well. He said the goal of any changes will be to improve supervision without compromising teaching.

A motion to renew existing variances was passed unanimously. The meeting was adjourned at 2:10 p.m.