NYC Department of Correction's Response to the "Utilization of Sick Call in NYC Jails" Report (received August 23, 2024)

The New York City Department of Correction (Department) appreciates the Board of Correction (Board) sharing its "Utilization of Sick Call in New York City Jail" report. After a careful review, the Department has serious concerns about the underlying data interpretation and analysis, and subsequent conclusions represented in the report.

The Board's analysis attempts to draw conclusions based on the ability to match records from two disparate data sources. When a match is not made between the data sources, there are several assumptions made as to why records are found in one dataset and not another. In many cases these assumptions suggest that there has been a failure or an adverse outcome, despite that this is not represented in the data. Additionally, this analysis assumes that sick call operates in a vacuum, divorced from other scheduled and unscheduled encounters that a person in custody may have with medical and mental health personnel. It also does not appear to take into account the role of people in custody within the clinic production process. People in custody can decline to attend a schedule clinic encounter at any point in the production process, which may result in a non-production or a delay in production. The Department recognizes the importance of clinical care for the population but does not use force to compel an individual to go to an appointment. This consideration does not appear to be accounted for in the analysis or in the recommendations. These limitations, compounded by the noted issues with the data analysis and interpretation, paint the picture that people in custody are largely not able to access health care, which is not true. In good faith, a stated limitation of the report should be that, without insight into the totality of healthcare received by people in custody, as well as a person's own discretion as to whether they attend their scheduled appointments, the absence of a scheduled appointment following a call to the CHS Health Triage Line (HTL) or non-production to a scheduled encounter does not necessarily indicate a failure with respect to the minimum standard.

We agree that all people in custody should have access to high quality medical care, and work diligently with our partners at NYC Health + Hospitals/Correctional Health Services (CHS) to ensure people in custody are produced to their clinic encounters if they choose to go. The Department believes that the CHS Health Triage Line (HTL) is an invaluable resource to people in custody and has proven an important improvement to providing access to healthcare in the jails. There is always more work to be done to ensure that people in custody have all due access to the to services. However, we regret that the Board has proceeded to issue this report and the recommendations therein despite the concerns the Department has raised with respect to fundamental issues within the methodology. We believe its publication will perpetuate misunderstanding about the Department's provision of access to medical care within the jails. We look forward to working with our partners to continue to improve access to healthcare within the jails.