

CHS Injury Reporting: March 2020

Version: 4/23/2020

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II. Data Dictionary

Injury Table	Definition
	Number of injury reports documented by CHS within the month, excluding injuries that are still
Table 1	pending as of the last day of the reporting period. All injury reports represent an in-person clinical
	encounter.
	Number of injury reports by determination.
Table 2	Confirmed injury is defined as an injury by history only, injury with physical evidence, or injury that resulted in urgent care or hospital transfer.
	Serious injury is defined as any one of the following: laceration requiring sutures; staples or glue,
	fracture, clinical nasal fracture, initial dislocation reduced in clinic or hospital, tendon tear, amputation,
	structural injury to organ, post-concussive syndrome or head injury requiring imaging, blistering burn
	involving face or >9% of total body surface.
Table 3	Number of confirmed injury reports where patient was sent to urgent care.
Table 4	Number of confirmed injury reports where patient was sent to hospital.
Table 5	Age of patient at time of confirmed injury report.
Table 6	Number of confirmed injury reports where the patient accepted or refused care.
	Number of confirmed serious injury reports by type. An injury report may contain more than one
Table 8	serious injury type; therefore the total number of injury types may not equal the number of serious
	injury reports.
Table 9	Number of confirmed non-serious injury reports with a documented blow to the head.
Table 10	Number of confirmed injury reports by bodily location.
Table 13	Number of confirmed injury reports by cause of injury as reported by patient to CHS.

Self-Harm Table	Definition
Table 1	Number of incidents of self-harm by type.
Table 2	Number of incidents of self-harm by type and age at time of incident.
Table 3	Number of incidents of self-harm by type and facility.
Table 4	Number of incidents of self-harm by type and housing type.

III. Summary Data

	CHS Injury Report								
	Reporting Period 3/1/2020-3/	31/202	0						
21	Total Injury Reports Documented by CHS	2614]						
2	Injury Reports by Injury Determination	Number	Percent	1					
	Confirmed Serious Injury Reports	100	4%						
	Confirmed Non-Serious Injury Reports	910	35%						
	Not Confirmed Injury Reports	1604	61%						
	Total Injury Reports	2614	100%						
3		So	rious	Non S	erious		juries	1	
: 3	Confirmed Injury Reports where Patient is Sent to Urgent	Number	Percent	Number	Percent	Number	Percent		
	Care	41	41%	28	3%	69	7%		
4	Confirmed Injury Reports where Patient is Sent to		rious		erious		juries		
	Hospital	Number	Percent	Number	Percent	Number	Percent		
		20	20%	16	2%	36	4%		
25			Serious		P	Non-Seriou	IS		All Inju
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-2
		0	13	87	3	120	787	3	133
6	Number of Confirmed Injury Reports by Patient		rious		erious		juries		
	Acceptance or Refusal of Care	Accepted			Refused	Accepted			
		100	0	845	65	945	65		
8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent	flaiun					
. 0	Laceration requiring sutures; staples or glue	53	50						
	Fracture	36	34						
	Clinical nasal fracture	2	29	6					
	Initial dislocation reduced in clinic or hospital	0	0%	6					
	Tendon tear	0 0%							
	Amputation	0	09	6					
	Structural injury to organ	1	19						
	Structural injury to organ Post-concussive syndrome or head injury requiring imaging	1 13	19 12	6					
	Post-concussive syndrome or head injury requiring			%					
	Post-concussive syndrome or head injury requiring imaging	13	12	%					
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface	13 0 105	12 09	%					
2 9	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type	13 0 105	12 09	%					
: 9	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports.	13 0 105	12 09 ne total number	%					
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head	13 0 105 : therefore th Number 124	12 09 te total number Percent 14%	% % * of					
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head	13 0 105 :; therefore th Number 124 Ser	12 09 Percent 14% ious	% % r of Non-S	erious		juries		
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location	13 0 105 ; therefore th 124 Number Number	12 09 Percent 14% ious Percent	% % of Non-S Number	Percent	Number	Percent		
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands	13 0 105 ; therefore th 124 Number 124 Ser Number 30	12 09 Percent 14% ious Percent 30%	% % * of Non-S Number 313	Percent 34%	Number 343	Percent 34%		
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face	13 0 105 ; therefore th 124 Number Number	12 09 Percent 14% ious Percent	% % of Non-S Number	Percent	Number	Percent		
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands	13 0 105 :; therefore th Number 124 Ser Number 30 61	12 09 Percent 14% ious Percent 30% 61%	% % * of Non-S Number 313 278	Percent 34% 31%	Number 343 339	Percent 34% 34%		
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet	13 0 105 ; therefore th 124 Number 124 Ser Number 30 61 5	12 09 e total number Percent 14% ious Percent 30% 61% 5%	% % % of Non-S Number 313 278 125 157 37	Percent 34% 31% 14%	Number 343 339 130	Percent 34% 34% 13%		
	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso	13 0 105 ; therefore th Number 124 Ser Number 30 61 5 4	12 09 e total number total number 14% ious Percent 30% 61% 5% 4%	% % of Non-S Number 313 278 125 157	Percent 34% 31% 14% 17%	Number 343 339 130 161	Percent 34% 34% 13% 16%		
: 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total	13 0 105 ; therefore th 124 Number 124 Ser Number 30 61 5 4 0 100	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 100%	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100%	Number 343 339 130 161 37 1010	Percent 34% 34% 13% 16% 4% 100%		
10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported	13 0 105 ; therefore th 124 Number 124 Ser 30 61 5 4 0 100	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 100% rious	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100% erious	Number 343 339 130 161 37 1010	Percent 34% 34% 13% 16% 4% 100%		
10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS	13 0 105 ; therefore th 124 Number 30 61 5 4 0 100 100 Number	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 100% rious Percent	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100% erious Percent	Number 343 339 130 161 37 1010 All In Number	Percent 34% 34% 13% 16% 4% 100% juries Percent		
10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant	13 0 105 : therefore th 124 Number 30 61 5 4 0 100 See Number 8	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 100% rious Percent 8%	% % % of Non-S Number 313 278 125 157 37 910 Non-S Number 18	Percent 34% 31% 14% 17% 4% 100% erious Percent 2%	Number 343 339 130 161 37 1010 All In Number 26	Percent 34% 34% 13% 16% 4% 100% juries Percent 3%		
2 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS	13 0 105 ; therefore th 124 Number 30 61 5 4 0 100 100 Number	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 100% rious Percent	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100% erious Percent	Number 343 339 130 161 37 1010 All In Number	Percent 34% 34% 13% 16% 4% 100% juries Percent		
2 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure	13 0 105 : therefore th 124 Number 30 61 5 4 0 100 100 See Number 8 2	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 100% rious Percent 8% 2%	% % % of Non-S Number 313 278 125 157 37 910 Non-S Number 18 27	Percent 34% 31% 14% 4% 100% erious Percent 2% 3%	Number 343 339 130 161 37 1010 All In Number 26 29	Percent 34% 34% 13% 16% 4% 100% juries Percent 3% 3%		
: 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational	13 0 105 ; therefore th 124 Number 30 61 5 4 0 100 Set Number 8 2 0	12 0? Percent 14% ious Percent 30% 61% 5% 4% 0% 100% rious Percent 8% 2% 0%	% % % of Non-S Number 313 278 125 157 37 910 Non-S Number 18 27 13	Percent 34% 31% 14% 17% 4% 100% erious Percent 2% 3% 1%	Number 343 339 130 161 37 1010 All In Number 26 29 13	Percent 34% 13% 16% 4% 100% juries Percent 3% 3% 1%		
2 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational	13 0 105 ; therefore th 124 Number 30 61 5 4 0 100 100 Number 8 2 0 44 0 4	12 09 et otal number 14% ious Percent 30% 61% 5% 61% 5% 61% 5% 61% 5% 61% 5% 61% 9% 0% 100%	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100% erious Percent 2% 1% 2% 3% 1% 26% 0.8% 3%	Number 343 339 130 161 37 1010 Number 26 29 13 282 7 32	Percent 34% 34% 13% 16% 4% 100% percent 3% 3% 1% 28% 0.7% 3%		
2 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury	13 0 105 ; therefore th 124 Number 30 61 5 4 0 100 100 Number 8 2 0 0 44 4 0 44 0 4 4	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 4% 0% 2% 0% 2% 0% 44% 0% 44% 15%	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100% erious Percent 2% 3% 1% 26% 0.8% 3% 11%	Number 343 339 130 161 37 1010 All In Number 26 29 13 282 7 32 118	Percent 34% 34% 13% 16% 4% 100% juries Percent 3% 3% 3% 1% 28% 0.7% 3% 12%		
2 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury Sexual assault	13 0 105 : therefore the 124 Number 30 61 5 4 0 0 100 Number 8 2 0 0 100 Number 8 2 0 0 4 4 0 0 100	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 61% 5% 61% 5% 0% 100%	% % % of Non-S Number 313 278 125 157 37 910 Non-S Number 18 27 13 238 27 13 238 27 13 238 27 8	Percent 34% 31% 14% 17% 4% 100% erious Percent 2% 3% 1% 0.8% 3% 11% 1%	Number 343 339 130 161 37 1010 All In Number 26 29 13 282 7 32 118 8	Percent 34% 34% 13% 16% 4% 4% 10% 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		
2 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury Sexual assault Slip and fall	13 0 105 : therefore the 124 Seer Number 30 61 5 4 0 100 100 See Number 8 2 0 44 0 44 15 0 44 15 0 0	12 09 Percent 14% ious Percent 30% 61% 5% 61% 5% 4% 0% 100% Percent 8% 2% 0% 44% 0% 44% 15% 0% 11%	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100% erious Percent 2% 3% 1% 26% 0.8% 3% 11% 11%	Number 343 339 130 161 37 1010 All In Number 26 29 13 282 7 32 118 8 109	Percent 34% 34% 13% 16% 4% 10% 9 9 9 9 9 9 9 9 9 9 9 9 9		
2 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury Sexual assault Slip and fall Transportation	13 0 105 : therefore the 124 Number 30 61 5 4 0 100 See Number 8 2 0 44 0 44 0 44 0 15 0 0 11 0 0	12 09 Percent 14% ious Percent 30% 61% 5% 4% 0% 100% fious Percent 8% 2% 0% 44% 0% 44% 0% 15% 0% 11% 0%	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100% erious Percent 2% 3% 1% 26% 0.8% 3% 11% 11% 1% 2%	Number 343 339 130 161 37 1010 All In Number 26 29 13 282 7 32 118 8 109 19	Percent 34% 34% 16% 4% 10% juries Percent 3% 3% 1% 28% 0.7% 3% 12% 12% 11% 2%		
2 10	Post-concussive syndrome or head injury requiring imaging Blistering burn involving face of >9% of total body surface Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury Sexual assault Slip and fall	13 0 105 : therefore the 124 Seer Number 30 61 5 4 0 100 100 See Number 8 2 0 44 0 44 15 0 44 15 0 0	12 09 Percent 14% ious Percent 30% 61% 5% 61% 5% 4% 0% 100% Percent 8% 2% 0% 44% 0% 44% 15% 0% 11%	% % % % % % % % % % % % % % % % % % %	Percent 34% 31% 14% 17% 4% 100% erious Percent 2% 3% 1% 26% 0.8% 3% 11% 11%	Number 343 339 130 161 37 1010 All In Number 26 29 13 282 7 32 118 8 109	Percent 34% 34% 13% 16% 4% 10% 9 9 9 9 9 9 9 9 9 9 9 9 9		

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IV. AMKC

	CHS Injury Report									
	Reporting Period 3/1/2020-3/	31/202)							
Table 1	Total Injury Reports Documented by CHS	622	[
Table 2	Injury Reports by Injury Determination	Number	Percent							
	Confirmed Serious Injury Reports	34	5%							
	Confirmed Non-Serious Injury Reports Not Confirmed Injury Reports	209 379	34% 61%							
	Total Injury Reports	622	100%							
	· · · · · · · · · · · · · · · · · · ·			1						
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent	Sei	ious	Non-S	erious	All In	juries			
	Care	Number	Percent	Number	Percent	Number	Percent			
		13	38%	2	1%	15	6%			
Table 4		Sei	ious	Non-S	erious	All In	iuries			
Table 4	Confirmed Injury Reports where Patient is Sent to	Number	Percent	Number	Percent	Number	Percent			
	Hospital	8	24%	0	0%	8	3%			
Table 5			Serious			lon-Seriou			All Injuries	
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-21	22+
		0	0	34	0	6	203	0	6	237
Table 6		Sei	ious	Non-S	erious	All In	iuries			
	Number of Confirmed Injury Reports by Patient	Accepted			Refused	Accepted				
	Acceptance or Refusal of Care	34	0	198	11	232	11			
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent 0 58							
	Laceration requiring sutures; staples or glue Fracture	21 7	19							
	Clinical nasal fracture	2	69							
	Initial dislocation reduced in clinic or hospital	0	09	%						
	Tendon tear	0	0%	%						
	Amputation	0	09							
	Structural injury to organ	1	39	%						
	Post-concussive syndrome or head injury requiring imaging	5	14	%						
	Blistering burn involving face of >9% of total body surface	0	09	%						
	Total	36								
	NOTE: A confirmed injury report may contain more than one serious injury type	• therefore th	e total number	rof						
	confirmed injury types may not equal the number of serious injury reports.									
	Confirmed Non-Serious Injury Reports Documenting Blow	Number	Percent]						
Table 9	to the Head									
	Head-blow	36	17%	J						
Table 10		Ser	ious	Non-S	erious	All In	iuries			
Table 10	Confirmed Injury Reports by Bodily Location	Number	Percent	Number	Percent	Number	Percent			
	Arms/Hands	10	29%	73	35%	83	34%			
	Head/Face	22	65%	76	36%	98	40%			
	Legs/Feet	1	3%	16	8%	17	7%			
	Torso Not recorded	1 0	3% 0%	33 11	16% 5%	34 11	14% 5%			
	Total	34	100%	209	100%	243	100%			
		-								
Table 13	Confirmed Injury Reports by Cause of Injury as Reported		ious		erious		juries			
	by Patient to CHS	Number	Percent	Number	Percent	Number	Percent			
	Attack by unknown assailant	4	12%	10	5%	14 F	6%			
	Door/gate closure Environment	1	3% 0%	4	2% 1%	5 2	2% 1%			
	Inmate on inmate fight	16	47%	60	29%	76	31%			
	Occupational	0	0%	0	0.0%	0	0.0%			
	Recreational	1	3%	1	0%	2	1%			
	Self-injury	5	15%	23	11%	28	12%			
	Sexual assault	0	0%	0	0%	0	0%			
	Slip and fall Transportation	4	12% 0%	31 5	15% 2%	35 5	14% 2%			
	Transportation DOC use of force	1	3%	55	2%	56	2%			
	Other	2	6%	18	9%	20	8%			
	Total	34	100%	209	100%	243	100%			
		,		,			,			

V. EMTC

۷.	EIVITC									
	CHS Injury Report				1					
	Reporting Period 3/1/2020-3/	31/202	D							
			-		1					
Table 1	Total Injury Reports Documented by CHS	29								
				1						
Table 2	Injury Reports by Injury Determination	Number								
	Confirmed Serious Injury Reports Confirmed Non-Serious Injury Reports	1 6	3% 21%							
	Not Confirmed Injury Reports	22	76%							
	Total Injury Reports	29	100%							
				1						
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent	Se	rious	Non-S	Serious	All In	juries			
	Care	Number	Percent	Number		Number	Percent			
		1	100%	0	0%	1	14%			
Table 4		So	rious	Non S	erious	All In	iurios			
Table 4	Confirmed Injury Reports where Patient is Sent to	Number	Percent	Number	1	Number	Percent			
	Hospital	0	0%	0	0%	0	0%			
Table 5			Serious		I	Non-Seriou	S		All Injuries	
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-21	22+
		0	0	1	0	1	5	0	1	6
Table 6		50	rious	Non	erious	All In	juries			
I able b	Number of Confirmed Injury Reports by Patient	Accepted			Refused	All In Accepted				
	Acceptance or Refusal of Care	1	0	6	0	7	0			
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent	of Injury]					
	Laceration requiring sutures; staples or glue	1	100							
	Fracture	0	09		4					
	Clinical nasal fracture	0	09		-					
	Initial dislocation reduced in clinic or hospital Tendon tear	0	09		-					
	Amputation	0	0%							
	Structural injury to organ	0	0%	6	İ					
	Post-concussive syndrome or head injury requiring	0	09	6						
	imaging	0		0	ļ					
		0	0%	6						
	Blistering burn involving face of >9% of total body surface Total	1			-					
	NOTE: A confirmed injury report may contain more than one serious injury type	; therefore tr	e total number	or						
	confirmed injury types may not equal the number of serious injury reports.]					
	Confirmed Non-Serious Injury Reports Documenting Blow			1						
Table 9	to the Head	Number	Percent							
	Head-blow	1	17%							
Table 10	Confirmed Injury Reports by Bodily Location	Ser	ious	Non-S	erious	All In	juries			
		Number	Percent	Number	Percent	Number	Percent			
	Arms/Hands Head/Face	0	0%	4	67%	4	57%			
	Legs/Feet	1	100% 0%	2	33% 0%	3 0	43% 0%			
	Torso	0	0%	0	0%	0	0%			
	Not recorded	0	0%	0	0%	0	0%			
	Total	1	100%	6	100%	7	100%			
_		-			·					
Table 13	Confirmed Injury Reports by Cause of Injury as Reported		rious		erious	All In				
	by Patient to CHS Attack by unknown assailant	Number 0	Percent 0%	Number 0	Percent 0%	Number 0	Percent 0%			
	Door/gate closure	0	0%	0	0%	0	0%			
	Environment	0	0%	0	0%	0	0%			
	Inmate on inmate fight	1	100%	0	0%	1	14%			
	Occupational	0	0%	0	0.0%	0	0.0%			
	Recreational	0	0%	0	0%	0	0%			
	Self-injury Sexual assault	0	0% 0%	3 0	50% 0%	3 0	43% 0%			
	Sexual assault Slip and fall	0	0%	0	0%	0	0%			
	Transportation	0	0%	0	0%	0	0%			
	DOC use of force	0	0%	3	50%	3	43%			
	Other	0	0%	0	0%	0	0%			
	Total	1	100%	6	100%	7	100%			
					•					

VI. GRVC

VI.	UNVC				_					
	CHS Injury Report									
	Reporting Period 3/1/2020-3/	/31/202	0							
Table 1	Total Injury Reports Documented by CHS	394]							
Table 2	Injury Reports by Injury Determination	Number	Percent							
	Confirmed Serious Injury Reports	14	4%							
	Confirmed Non-Serious Injury Reports	166	42%							
	Not Confirmed Injury Reports	214	54%							
	Total Injury Reports	394	100%							
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent		rious		erious Percent		juries			
	Care	Number 6	Percent 43%	Number 6	4%	Number 12	Percent 7%			
		0	43/0	0	470	12	770			
Table 4		Se	rious	Non-S	erious	All In	juries			
	Confirmed Injury Reports where Patient is Sent to	Number	Percent	Number		Number	Percent			
	Hospital	3	21%	7	4%	10	6%			
Table 5			Serious		1	Non-Seriou	S		All Injuries	
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-21	22+
		0	2	12	0	11	155	0	13	167
Table 6	Number of Confirmed Injury Reports by Patient		rious		erious		juries			
	Acceptance or Refusal of Care	Accepted			Refused		Refused			
		14	0	153	13	167	13			
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent	of Injury	1					
Table 0	Laceration requiring sutures; staples or glue	7	50							
	Fracture	4	29							
	Clinical nasal fracture	0	09	6						
	Initial dislocation reduced in clinic or hospital	0	09	6						
	Tendon tear	0	09	6						
	Amputation	0	09	6						
	Structural injury to organ	0	09	6						
	Post-concussive syndrome or head injury requiring	3	21	%						
	imaging	_								
	Blistering burn involving face of >9% of total body surface	0	09	6						
	Total	14								
	NOTE: A confirmed injury report may contain more than one serious injury type	• therefore th	e total number	of						
	confirmed injury types may not equal the number of serious injury reports.	,								
	commence injuly types may not equal the number of serious injuly reports.				1					
	Confirmed Non-Serious Injury Reports Documenting Blow	Number	Deveent							
Table 9	to the Head	Number	Percent							
	Head-blow	24	14%							
		-								
Table 10	Confirmed Injury Reports by Bodily Location	Ser	ious	Non-S	erious		juries			
		Number	Percent	Number	Percent	Number	Percent			
	Arms/Hands	6	43%	55	33%	61	34%			
	Head/Face	7	50%	47	28%	54	30%			
	Legs/Feet Torso	0	0% 7%	20 36	12% 22%	20 37	11% 21%			
	Not recorded	0	0%	8	5%	8	4%			
	Total	14	100%	166	100%	180	100%			
Table 13	Confirmed Injury Reports by Cause of Injury as Reported	Se	rious	Non-S	erious	All In	juries			
	by Patient to CHS	Number	Percent	Number	Percent	Number	Percent			
	Attack by unknown assailant	0	0%	2	1%	2	1%			
	Door/gate closure	1	7%	5	3%	6	3%			
	Environment	0	0%	3	2%	3	2%			
	Inmate on inmate fight	3	21%	39	23%	42	23%			
	Occupational Recreational	0	0%	1	0.6%	1	0.6%			
	Self-injury	0	0% 29%	1 12	1% 7%	1 16	1% 9%			
	Sexual assault	4	0%	5	3%	16 5	9% 3%			
	Slip and fall	2	14%	21	13%	23	13%			
	Transportation	0	0%	0	0%	0	0%			
	DOC use of force	2	14%	63	38%	65	36%			
	Other	2	14%	14	8%	16	9%			
	Total	14	100%	166	100%	180	100%			
	<u> </u>		I		!					

VII. HOJC

V II.	ПОЈС									
	CHS Injury Report				1					
	Reporting Period 3/1/2020-3/	/31/202	0							
			-		1					
Table 1	Total Injury Reports Documented by CHS	18								
			•	_						
Table 2	Injury Reports by Injury Determination	Number	Percent							
	Confirmed Serious Injury Reports	0	0%							
	Confirmed Non-Serious Injury Reports	3	17%							
	Not Confirmed Injury Reports	15	83%							
	Total Injury Reports	18	100%	l						
		6-		New				I		
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent	Se Number	rious Percent	Non-S Number	erious Percent	All In Number	juries			
	Care	0	0%	0	0%	0	Percent 0%			
		U	078	0	078	0	076	I.		
Table 4		Se	rious	Non-S	erious	All In	juries			
	Confirmed Injury Reports where Patient is Sent to	Number	Percent	Number	1	Number	Percent			
	Hospital	0	0%	0	0%	0	0%			
						-				
Table 5			Serious		1	Non-Seriou	IS		All Injuries	
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-21	22+
		0	0	0	3	0	0	3	0	0
				-		-				
Table 6	Number of Confirmed Injury Reports by Patient		rious		erious		juries			
	Acceptance or Refusal of Care	Accepted			Refused		Refused			
		0	0	3	0	3	0	J		
T-11 0		AL	D -1		1					
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent 0		-					
	Laceration requiring sutures; staples or glue	0	05		-					
	Fracture Clinical nasal fracture	0	05		-					
	Initial dislocation reduced in clinic or hospital	0	05		-					
	Tendon tear	0	05		-					
	Amputation	0	05							
	Structural injury to organ	0	09		1					
	Post-concussive syndrome or head injury requiring				1					
	imaging	0	09	%						
		_	0	v	1					
	Blistering burn involving face of >9% of total body surface	0	09	<i>/</i> o						
	Total	0								
	NOTE: A confirmed injury report may contain more than one serious injury type	e; therefore th	e total number	rof						
	confirmed injury types may not equal the number of serious injury reports.									
					1					
	Confirmed Non-Serious Injury Reports Documenting Blow		_	1						
Table 9	to the Head	Number	Percent							
	Head-blow	1	33%							
						-				
Table 10	Confirmed Injury Reports by Bodily Location	Sei	ious	Non-S	erious	All In	juries			
	commed injury reports by Bodily Location	Number	Percent	Number	Percent	Number	Percent			
	Arms/Hands	0	0%	1	33%	1	33%			
	Head/Face	0	0%	2	67%	2	67%			
	Legs/Feet	0	0%	0	0%	0	0%			
	Torso	0	0%	0	0%	0	0%			
	Not recorded	0	0%	0	0%	0	0%			
	Total	0	0%	3	100%	3	100%	I		
		6-		New				I		
Table 13	Confirmed Injury Reports by Cause of Injury as Reported		rious Percent		erious		juries Percent			
	by Patient to CHS Attack by unknown assailant	Number 0	0%	Number 0	Percent 0%	Number 0	0%			
	Door/gate closure	0	0%	0	0%	0	0%			
	Environment	0	0%	0	0%	0	0%			
	Inmate on inmate fight	0	0%	0	0%	0	0%			
	Occupational	0	0%	0	0.0%	0	0.0%			
	Recreational	0	0%	1	33%	1	33%			
	Self-injury	0	0%	1	33%	1	33%			
	Sexual assault	0	0%	0	0%	0	0%	ĺ		
	Slip and fall	0	0%	0	0%	0	0%	ĺ		
	Transportation	0	0%	0	0%	0	0%	i i		
	DOC use of force	0	0%	1	33%	1	33%	Í.		
	Other	0	0%	0	0%	0	0%			
	Total	0	0%	3	100%	3	100%			
	J				•					

VIII. MDC

III. IV	IDC									
	CHS Injury Report				1					
	Reporting Period 3/1/2020-3/	31/2020	n							
		51/2020	,		1					
Table 1	Total Injury Reports Documented by CHS	261	1							
	,,,,,,,									
Table 2	Injury Reports by Injury Determination	Number	Percent							
	Confirmed Serious Injury Reports	6	2%							
	Confirmed Non-Serious Injury Reports	93	36%							
	Not Confirmed Injury Reports	162	62%							
	Total Injury Reports	261	100%							
								1		
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent		ious		erious		juries			
	Care	Number 1	Percent 17%	Number 1	Percent 1%	Number 2	Percent 2%			
			1770	1	1/0	2	270			
Table 4		Sei	ious	Non-S	erious	All In	juries			
	Confirmed Injury Reports where Patient is Sent to	Number	Percent	Number	1		Percent	1		
	Hospital	1	17%	1	1%	2	2%			
Table 5			Serious		I	Non-Seriou	S		All Injuries	
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-21	22+
		0	0	6	0	4	89	0	4	95
								1		
Table 6	Number of Confirmed Injury Reports by Patient		ious		erious		juries			
	Acceptance or Refusal of Care	6	Refused 0	88	Refused 5	94	Refused 5			
		0	U	00	5	94	5			
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent	of Iniury	1					
	Laceration requiring sutures; staples or glue	3	50							
	Fracture	2	33	%						
	Clinical nasal fracture	0	0%	6						
	Initial dislocation reduced in clinic or hospital	0	0%	6						
	Tendon tear	0	0%							
	Amputation	0	09							
	Structural injury to organ	0	0%	6						
	Post-concussive syndrome or head injury requiring	1	17	%						
	imaging									
	Blistering burn involving face of >9% of total body surface	0	0%	6						
	Total	6								
	NOTE: A confirmed injury report may contain more than one serious injury type	• therefore th	e total number	of	1					
		.,								
	confirmed injury types may not equal the number of serious injury reports.				J					
	Confirmed Non-Serious Injury Reports Documenting Blow			1						
Table 9	to the Head	Number	Percent							
	Head-blow	12	13%							
Table 10	Confirmed Injury Reports by Bodily Location	Ser	ious	Non-S	Serious	All In	juries			
	commed injury reports by bouny totation	Number	Percent	Number	Percent	Number	Percent			
	Arms/Hands	2	33%	47	51%	49	49%			
	Head/Face	4	67%	20	22%	24	24%			
	Legs/Feet	0	0%	19	20%	19	19%	1		
	Torso	0	0%	7	8%	7	7%			
	Not recorded Total	0 6	0% 100%	0 93	0% 100%	0 99	0% 100%			
		U	100/8	33	100%	33	100%			
Table 13	Confirmed Injury Reports by Cause of Injury as Reported	Sei	ious	Non-S	Serious	All In	juries			
	by Patient to CHS	Number	Percent	Number	Percent	Number	Percent			
	Attack by unknown assailant	0	0%	1	1%	1	1%			
	Door/gate closure	0	0%	12	13%	12	12%			
	Environment	0	0%	0	0%	0	0%			
	Inmate on inmate fight	4	67%	13	14%	17	17%			
	Occupational	0	0%	2	2.2%	2	2.0%			
	Recreational	0	0%	4 9	4%	4 10	4%			
	Self-injury Sexual assault	0	17% 0%	9	10% 0%	10	10% 0%			
	Slip and fall	0	0%	4	4%	4	4%			
	Transportation	0	0%	2	2%	2	2%			
	DOC use of force	1	17%	37	40%	38	38%	l		
	Other	0	0%	9	10%	9	9%			
16	Total	6	100%	93	100%	99	100%	l		
0	٠				•					

IX. NIC

IX.	NIC									
	CHS Injury Report									
	Reporting Period 3/1/2020-3/	/31/202	0							
		1	1		•					
Table 1	Total Injury Reports Documented by CHS	133	l							
Table 2	Injury Reports by Injury Determination	Number	Percent							
	Confirmed Serious Injury Reports	5	4%							
	Confirmed Non-Serious Injury Reports	42	32%							
	Not Confirmed Injury Reports	86	65%							
	Total Injury Reports	133	100%							
		1								
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent		rious		erious		juries			
	Care	Number 1	Percent 20%	Number 2	Percent 5%	Number 3	Percent 6%	1		
		1	2078	2	576	5	070			
Table 4		Se	rious	Non-S	erious	All In	juries	Ì		
	Confirmed Injury Reports where Patient is Sent to Hospital	Number	Percent	Number	Percent	Number	Percent	1		
	позрітаї	3	60%	1	2%	4	9%	I		
										_
Table 5	Annual Debient at Time of Confirmed Inform Demont		Serious			Non-Seriou		10.17	All Injuries	
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+ 5	16-17 0	18-21	22+ 34	16-17 0	18-21 8	
		0	0	5	0	8	54	0	•	-
Table 6		Se	rious	Non-S	erious	All In	juries	ĺ		
	Number of Confirmed Injury Reports by Patient	Accepted	Refused	Accepted	Refused	Accepted	Refused	1		
	Acceptance or Refusal of Care	5	0	40	2	45	2	I		
			_		1					
Table 8	Injury Reports by Type of Confirmed Serious Injury Laceration requiring sutures; staples or glue	Number	Percent o							
	Fracture	0	60							
	Clinical nasal fracture	0	09							
	Initial dislocation reduced in clinic or hospital	0	0%	6						
	Tendon tear	0	0%	6						
	Amputation	0	09	6						
	Structural injury to organ	0	0%	6						
	Post-concussive syndrome or head injury requiring	2	40	%						
	imaging									
	Blistering burn involving face of >9% of total body surface	0	09	6						
	Total	5								
	NOTE: A confirmed injury report may contain more than one serious injury type	e; therefore th	ie total numbei	of						
	confirmed injury types may not equal the number of serious injury reports.									
					1					
	Confirmed Non-Serious Injury Reports Documenting Blow	Number	Percent							
Table 9	to the Head									
	Head-blow	5	12%							
		6		Nen	·		luniaa	1		
Table 10	Confirmed Injury Reports by Bodily Location	Number	ious Percent	Number	erious Percent		juries Percent			
	Arms/Hands	0	0%	13	31%	13	28%	Í		
	Head/Face	5	100%	12	29%	17	36%			
	Legs/Feet	0	0%	5	12%	5	11%	1		
	Torso	0	0%	10	24%	10	21%	1		
	Not recorded	0	0%	2	5%	2	4%	1		
	Total	5	100%	42	100%	47	100%			
Table 13	Confirmed Injury Reports by Cause of Injury as Reported	Se	rious	Non-S	erious	All in	juries	Í		
	by Patient to CHS	Number	Percent	Number	Percent	Number	Percent	Ì		
	Attack by unknown assailant	1	20%	0	0%	1	2%			
	Door/gate closure	0	0%	0	0%	0	0%	1		
	Environment	0	0%	5	12%	5	11%	1		
	Inmate on inmate fight Occupational	2	40% 0%	10 0	24% 0.0%	12 0	26% 0.0%	I		
	Recreational	0	0%	2	0.0% 5%	2	4%	Í		
	Self-injury	1	20%	4	10%	5	11%	Ì		
	Sexual assault	0	0%	1	2%	1	2%	l		
	Slip and fall	1	20%	6	14%	7	15%			
	Transportation	0	0%	0	0%	0	0%			
	DOC use of force	0	0%	7	17%	7	15%			
	Other	0	0%	7	17%	7	15%	ĺ		
	Total	5	100%	42	100%	47	100%			

22+

39

Χ. OBCC

Λ.	OBCC									
	CHS Injury Report									
	Reporting Period 3/1/2020-3/	31/202	D							
					-					
Table 1	Total Injury Reports Documented by CHS	444	l							
Table 2	Injury Reports by Injury Determination	Number	Percent	1						
	Confirmed Serious Injury Reports	16	4%							
	Confirmed Non-Serious Injury Reports	160	36%							
	Not Confirmed Injury Reports	268	60%	1						
	Total Injury Reports	444	100%							
								1		
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent		rious		erious		juries	í		
	Care	Number 9	Percent 56%	Number 5	Percent 3%	Number 14	Percent 8%			
		, ,	30/0	5	570	14	070			
Table 4	Confirmed Inium, Departs where Detient is Contra	Se	rious	Non-S	erious	All In	juries	1		
	Confirmed Injury Reports where Patient is Sent to Hospital	Number	Percent	Number	Percent	Number	Percent	1		
		4	25%	1	1%	5	3%			
Table 5	Age of Patient at Time of Confirmed Injury Report	16-17	Serious 18-21	22+	16-17	Non-Seriou 18-21	s 22+	16-17	All Injuries 18-21	22+
	Age of Patient at time of commet injury report	0	0	16	0	10-21	149	0	10-21	165
		Ŭ	Ū	10	Ū		145			105
Table 6	Number of Confirmed Inium Departs by Detient	Se	rious	Non-S	Serious	All In	juries	1		
	Number of Confirmed Injury Reports by Patient Acceptance or Refusal of Care	Accepted	Refused	Accepted	Refused	Accepted	Refused	1		
	Acceptance of Nerusal of Care	16	0	143	17	159	17			
					1					
Table 8	Injury Reports by Type of Confirmed Serious Injury Laceration requiring sutures; staples or glue	Number 9	Percent of 47							
	Fracture	8	42							
	Clinical nasal fracture	0	09		1					
	Initial dislocation reduced in clinic or hospital	0	09	%						
	Tendon tear	0	09	%						
	Amputation	0	09							
	Structural injury to organ	0	05	%						
	Post-concussive syndrome or head injury requiring imaging	2	11	%						
	IIIIdgiilg									
	Blistering burn involving face of >9% of total body surface	0	05	%						
	Total	19								
	NOTE: A confirmed injury report may contain more than one serious injury type	; therefore th	e total numbe	r of						
	confirmed injury types may not equal the number of serious injury reports.									
					-					
	Confirmed Non-Serious Injury Reports Documenting Blow	Number	Percent							
Table 9	to the Head	12	00/							
	Head-blow	12	8%	J						
Table 10		Ser	ious	Non-S	erious	All In	juries			
	Confirmed Injury Reports by Bodily Location	Number	Percent	Number	Percent	Number	Percent			
	Arms/Hands	3	19%	42	26%	45	26%	l.		
	Head/Face	12	75%	46	29%	58	33%	1		
	Legs/Feet	1	6%	22	14%	23	13%	1		
	Torso	0	0%	38	24%	38	22%	Í		
	Not recorded Total	0 16	0% 100%	12 160	8% 100%	12 176	7% 100%	1		
	1000	10	100/0	100	100/0	1/0	100/0			
Table 13	Confirmed Injury Reports by Cause of Injury as Reported	Se	rious	Non-S	erious	All In	juries	1		
	by Patient to CHS	Number	Percent	Number	Percent	Number	Percent	1		
	Attack by unknown assailant	1	6%	0	0%	1	1%	(
	Door/gate closure	0	0%	0	0%	0	0%	1		
	Environment Inmate on inmate fight	0 11	0% 69%	1 41	1% 26%	1 52	1% 30%	1		
	Occupational	0	0%	41 0	0.0%	0	0.0%	1		
	Recreational	0	0%	6	4%	6	3%	1		
	Self-injury	2	13%	22	14%	24	14%	I		
	Sexual assault	0	0%	0	0%	0	0%	1		
	Slip and fall	1	6%	17	11%	18	10%	i		
	Transportation	0	0%	7	4% 30%	7 48	4% 27%	, l		
	DOC use of force Other	1	0% 6%	48 18	30%	48 19	27%			
		16	100%	160	100%	176	100%	1		
	Total									

XI. RMSC

	CHS Injury Report									
	Reporting Period 3/1/2020-3/	31/202	0							
Table 1	Total Injury Reports Documented by CHS	104	l							
Table 2	Injury Reports by Injury Determination	Number	Percent]						
	Confirmed Serious Injury Reports	1	1%							
	Confirmed Non-Serious Injury Reports	55 48	53% 46%							
	Not Confirmed Injury Reports Total Injury Reports	48 104	46%							
	Total injury hepoils	104	100/0	1						
Table 3	Confirmed Inium. Demonto where Dations is Southa Limous	Se	rious	Non-S	erious	All In	juries			
	Confirmed Injury Reports where Patient is Sent to Urgent Care	Number	Percent	Number	Percent	Number	Percent			
	Care	0	0%	0	0%	0	0%			
T-bl- 4		6.		Nen						
Table 4	Confirmed Injury Reports where Patient is Sent to	Number	rious Percent	Non-S Number	erious Percent	All In Number	Percent			
	Hospital	0	0%	1	2%	1	2%			
		0	078	1	270	1	270			
Table 5			Serious		ſ	Non-Seriou	S		All Injuries	
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-21	22+
		0	0	1	0	2	53	0	2	54
		-								
Table 6	Number of Confirmed Injury Reports by Patient		rious		erious	All In				
	Acceptance or Refusal of Care	Accepted	Refused 0	Accepted 52	Refused 3	Accepted 53	Refused 3			
		1 1	0	52	5	55	5			
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent	of Injury	1					
	Laceration requiring sutures; staples or glue	0	0%	%						
	Fracture	1	100							
	Clinical nasal fracture	0	09							
	Initial dislocation reduced in clinic or hospital	0	09							
	Tendon tear Amputation	0	05							
	Structural injury to organ	0	05							
	Post-concussive syndrome or head injury requiring									
	imaging	0	09							
	Blistering burn involving face of >9% of total body surface	0	0%	<i>/</i> o						
	Total	1								
	NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports.	e; therefore th	e total numbe	r of						
	Confirmed Non-Serious Injury Reports Documenting Blow			1						
Table 9	to the Head	Number	Percent							
	Head-blow	8	15%							
		1								
Table 10	Confirmed Injury Reports by Bodily Location	Ser	ious		erious	All In	juries			
		Number		Number		Number	Percent			
	Arms/Hands	0	0% 0%	11 20	20%	11 20	20% 36%			
	Head/Face Legs/Feet	0	0%	20 14	36% 25%	20 14	36% 25%			
	Torso	1	100%	9	16%	10	18%			
	Not recorded	0	0%	1	2%	1	2%			
	Total	1	100%	55	100%	56	100%			
		-								
Table 13	Confirmed Injury Reports by Cause of Injury as Reported		rious		erious	All In				
	by Patient to CHS Attack by unknown assailant	Number 0	Percent 0%	Number 3	Percent 5%	Number 3	Percent 5%			
	Door/gate closure	0	0%	1	2%	1	2%			
	Environment	0	0%	0	0%	0	0%			
	Inmate on inmate fight	0	0%	21	38%	21	38%			
	Occupational	0	0%	1	1.8%	1	1.8%			
	Recreational	0	0%	0	0%	0	0%			
	Self-injury	0	0%	9	16%	9	16%			
	Sexual assault Slip and fall	0	0% 100%	1 7	2% 13%	1 8	2% 14%			
	Slip and fall Transportation	0	0%	0	13% 0%	8	14% 0%			
	DOC use of force	0	0%	7	13%	7	13%			
	Other	0	0%	5	9%	5	9%			
	Total	1	100%	55	100%	56	100%			
		•			•					

XII. RNDC n

AII .	RNDC				_					
	CHS Injury Report									
	Reporting Period 3/1/2020-3/	31/202	D							
	· · · · · · · · · · · · · · · · · · ·	-			•					
Table 1	Total Injury Reports Documented by CHS	422								
				1						
Table 2	Injury Reports by Injury Determination	Number	Percent 3%							
	Confirmed Serious Injury Reports Confirmed Non-Serious Injury Reports	12 95	23%							
	Not Confirmed Injury Reports	315	75%							
	Total Injury Reports	422	100%							
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent		rious	Non-S	erious		juries			
	Care	Number	Percent	Number	Percent	Number	Percent			
		6	50%	10	11%	16	15%			
Table 4		50	rious	Non	erious		juries			
Table 4	Confirmed Injury Reports where Patient is Sent to	Number	Percent	Number		Number	Percent			
	Hospital	0	0%	3	3%	3	3%			
		Ŭ	0/0	5	0,0	J	0,0			
Table 5			Serious		I	Non-Seriou	IS		All Injuries	
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-21	22+
		0	11	1	0	77	18	0	88	19
Table 6	Number of Confirmed Injury Reports by Patient		rious		erious		juries			
	Acceptance or Refusal of Care	Accepted			Refused	Accepted				
		12	0	85	10	97	10			
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent	of Iniury	1					
	Laceration requiring sutures; staples or glue	8	67							
	Fracture	4	33	%						
	Clinical nasal fracture	0	0%	%						
	Initial dislocation reduced in clinic or hospital	0	09	%						
	Tendon tear	0	09	%						
	Amputation	0	09							
	Structural injury to organ	0	09	6						
	Post-concussive syndrome or head injury requiring	0	09	%						
	imaging	-								
	Blistering burn involving face of >9% of total body surface	0	09	6						
	Total	12								
	NOTE: A confirmed injury report may contain more than one serious injury type	; therefore th	e total numbe	rof						
	confirmed injury types may not equal the number of serious injury reports.									
	· · · · · · · · · · · · · · · · · · ·				1					
	Confirmed Non-Serious Injury Reports Documenting Blow	Number	Percent]						
Table 9	to the Head	Number	reiteitt							
	Head-blow	8	8%	l						
Table 10	Confirmed Injury Reports by Bodily Location		ious		erious		juries			
	Arms/Hands	Number 3	Percent 25%	Number 46	Percent 48%	Number 49	Percent 46%			
	Head/Face	7	23% 58%	20	48% 21%	27	46% 25%			
	Legs/Feet	1	8%	14	15%	15	14%			
	Torso	1	8%	14	15%	15	14%			
	Not recorded	0	0%	1	1%	1	1%			
	Total	12	100%	95	100%	107	100%			
		-			•					
Table 13	Confirmed Injury Reports by Cause of Injury as Reported	-	rious		erious		juries			
	by Patient to CHS	Number	Percent	Number	Percent	Number	Percent			
	Attack by unknown assailant Door/gate closure	1 0	8% 0%	1 4	1% 4%	2	2% 4%			
	Environment	0	0%	4	4%	4	4%			
	Inmate on inmate fight	4	33%	23	24%	27	25%			
	Occupational	0	0%	3	3.2%	3	2.8%			
	Recreational	2	17%	11	12%	13	12%			
	Self-injury	0	0%	14	15%	14	13%			
	Sexual assault	0	0%	1	1%	1	1%			
	Slip and fall	1	8%	4	4%	5	5%			
	Transportation	0	0%	5	5%	5	5%			
	DOC use of force	1	8%	15	16%	16	15%			
	Other	3 12	25%	13	14%	16	15%			
	Total	12	100%	95	100%	107	100%			

XIII. VCBC

AIII.	VCDC								
	CHS Injury Report								
	Reporting Period 3/1/2020-3/	/31/202	0						
Table 1	Total Injury Reports Documented by CHS	178]						
Table 2	Injury Reports by Injury Determination	Number	Percent						
	Confirmed Serious Injury Reports	11	6%						
	Confirmed Non-Serious Injury Reports	75	42%						
	Not Confirmed Injury Reports	92	52%						
	Total Injury Reports	178	100%						
								1	
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent		rious		erious		juries		
	Care	Number 4	Percent	Number		Number	Percent		
		4	36%	1	1%	5	6%	ł	
Table 4		So	rious	Non-9	erious	All in	juries	I	
Table 4	Confirmed Injury Reports where Patient is Sent to	Number	Percent	Number	Percent	Number	Percent		
	Hospital	1	9%	1	1%	2	2%		
		1	570	1	1/0	2	270	ł	
Table 5			Serious			Non-Seriou	IS		All Injuries
	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17	18-21
		0	0	11	0	0	75	0	0
Table 6		Se	rious	Non-S	erious	All In	juries	1	
	Number of Confirmed Injury Reports by Patient	Accepted	Refused	Accepted	Refused	Accepted	Refused		
	Acceptance or Refusal of Care	11	0	71	4	82	4		
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent	of Injury					
	Laceration requiring sutures; staples or glue	4	36	%					
	Fracture	7	64	%					
	Clinical nasal fracture	0	05	6					
	Initial dislocation reduced in clinic or hospital	0	05	6					
	Tendon tear	0	09	6					
	Amputation	0	09						
	Structural injury to organ	0	09	6	-				
	Post-concussive syndrome or head injury requiring	0	09	6					
	imaging	, , , , , , , , , , , , , , , , , , ,	•,	-	-				
		0	09	6					
	Blistering burn involving face of >9% of total body surface	11			-				
	Total	1 11							
	NOTE: A confirmed injury report may contain more than one serious injury type	; therefore th	e total number	of					
	confirmed injury types may not equal the number of serious injury reports.								
	Confirmed Non-Serious Injury Reports Documenting Blow	Number	Percent						
Table 9	to the Head								
	Head-blow	17	23%						
								1	
Table 10	Confirmed Injury Reports by Bodily Location		ious		Serious		juries		
	- h	Number	Percent	Number	Percent	Number	Percent		
	Arms/Hands	6	55%	20	27%	26	30%		
	Head/Face	3	27%	30	40%	33	38%		
	Legs/Feet Torso	2	18% 0%	15 8	20% 11%	17 8	20% 9%		
	Not recorded	0	0%	2	3%	2	2%		
	Total	11	100%	- <u>-</u> 75	100%	86	100%		
	1000		100/0	73	100/0	00	100/0	ł	
Table 13	Confirmed Injury Reports by Cause of Injury as Reported	Se	rious	Non-S	Serious	All In	juries	1	
	by Patient to CHS	Number	Percent	Number	Percent	Number	Percent		
	Attack by unknown assailant	1	9%	1	1%	2	2%		
	Door/gate closure	0	0%	1	1%	1	1%		
	Environment	0	0%	1	1%	1	1%		
	Inmate on inmate fight	3	27%	30	40%	33	38%		
	Occupational	0	0%	0	0.0%	0	0.0%	ĺ	
	Recreational	1	9%	2	3%	3	3%	l	
	Self-injury	2	18%	4	5%	6	7%	l	
	Sexual assault	0	0%	0	0%	0	0%	l	
	Slip and fall	1	9%	8	11%	9	10%	1	
	Transportation	0	0%	0	0%	0	0%		
	DOC use of force	1	9%	25	33%	26	30%		
	Other	2	18%	3	4%	5	6%		
	Total	11	100%	75	100%	86	100%		
	H				•			•	

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XIV. WF

	CHS Injury Report							
	Reporting Period 3/1/2020-3/	31/202	0					
Table 1	Total Injury Reports Documented by CHS	9]		I			
Table 2	Injury Reports by Injury Determination	Number	Percent	1				
	Confirmed Serious Injury Reports	0	0%					
	Confirmed Non-Serious Injury Reports	6	67%					
	Not Confirmed Injury Reports	3	33%					
	Total Injury Reports	9	100%					
		6-		No. C		AU 1	1	1
Table 3	Confirmed Injury Reports where Patient is Sent to Urgent	Number	rious Percent	Number	erious Percent	Number	juries Percent	
	Care	0	0%	1	17%	1	17%	
		Ū	0/0	-	2770	-	1,70	1
Table 4	Confirmed Injury Reports where Patient is Sent to	Se	rious	Non-S	erious	All In	juries	1
	Hospital	Number	Percent	Number	Percent	Number	Percent	
		0	0%	1	17%	1	17%	İ
Table C			Serious			Non-Seriou		
Table 5	Age of Patient at Time of Confirmed Injury Report	16-17	18-21	22+	16-17	18-21	22+	16-17
	Age of rational time of commed injury hepore	0	0	0	0	0	6	0
		0	Ū	Ū	Ū	Ŭ	Ū	
Table 6	Number of Confirmed Injum: Departs by Definit	Se	rious	Non-S	erious	All In	juries	1
	Number of Confirmed Injury Reports by Patient Acceptance or Refusal of Care	Accepted	Refused	Accepted	Refused	Accepted	Refused	
		0	0	6	0	6	0	j
					1			
Table 8	Injury Reports by Type of Confirmed Serious Injury	Number	Percent					
	Laceration requiring sutures; staples or glue Fracture	0	09					
	Clinical nasal fracture	0	05					
	Initial dislocation reduced in clinic or hospital	0	09					
	Tendon tear	0	09	%				
	Amputation	0	09	%				
	Structural injury to organ	0	09	%				
	Post-concussive syndrome or head injury requiring imaging	0	09	%				
	Blistering burn involving face of >9% of total body surface	0	09	%				
	Total	0						
		0						
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow	0						
Table 9	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head	0 ; therefore th Number	e total number Percent					
Table 9	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow	0 ; therefore th	e total number					
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head	0 ; therefore th Number 0	Percent	r of	arious		iurior	I
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head	0 ; therefore th Number 0 Ser	Percent 0%	r of Non-S	erious		juries	
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location	0 therefore the Number 0 Ser Number	Percent 0% ious Percent	nof Non-S Number	Percent	Number	Percent	
Table 9 Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow	0 ; therefore th Number 0 Ser	Percent 0%	r of Non-S			-	
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands	0 therefore the Number 0 Number 0	Percent 0% ious Percent 0%	Non-S Number 1	Percent 17%	Number 1	Percent 17%	
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso	0 therefore the Number 0 Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0%	Non-S Number 1 3 0 2	Percent 17% 50%	Number 1 3 0 2	Percent 17% 50% 0% 33%	
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded	0 therefore the Number 0 Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0%	Non-S Number 1 3 0 2 0	Percent 17% 50% 0% 33% 0%	Number 1 3 0 2 0	Percent 17% 50% 0% 33% 0%	
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso	0 therefore the Number 0 Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0%	Non-S Number 1 3 0 2	Percent 17% 50% 0% 33%	Number 1 3 0 2	Percent 17% 50% 0% 33%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total	0 therefore th Number 0 Ser Number 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0% 0%	Non-S Number 1 3 0 2 0 6	Percent 17% 50% 0% 33% 0% 100%	Number 1 3 0 2 0 6	Percent 17% 50% 0% 33% 0% 100%	
	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total	0 therefore th Number 0 Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0% 0% 0% 0% o% o%	r of Non-S Number 1 3 0 2 0 6 6 Non-S	Percent 17% 50% 0% 33% 0% 100% erious	Number 1 3 0 2 0 6 All In	Percent 17% 50% 0% 33% 0% 100% juries	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS	0 therefore th Number 0 Ser Number 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0% 0%	Non-S Number 1 3 0 2 0 6	Percent 17% 50% 0% 33% 0% 100%	Number 1 3 0 2 0 6	Percent 17% 50% 0% 33% 0% 100%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total	0	Percent 0% ious Percent 0% 0% 0% 0% 0% 0% 0%	of Non-S Number 1 3 0 2 0 6 Non-S Number	Percent 17% 50% 0% 33% 0% 100% erious Percent	Number 1 3 0 2 0 6 All In Number	Percent 17% 50% 0% 33% 0% 100% juries Percent	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS	0 therefore the Number 0 Ser Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	r of Non-S Number 1 3 0 2 0 6 Non-S Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% erious Percent 0%	Number 1 3 0 2 0 6 All In Number 0	Percent 17% 50% 0% 33% 0% 100% juries Percent 0%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight	0 therefore the Number 0 Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	Non-S Number 1 3 0 2 0 6 Number 0 0 0 0 0 1	Percent 17% 50% 0% 33% 0% 100% erious Percent 0% 0% 0% 17%	Number 1 3 0 2 0 6 All In Number 0 0 1	Percent 17% 50% 0% 33% 0% 100% juries Percent 0% 0% 0% 17%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational	0 therefore the Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	r of Non-S Number 1 3 0 2 0 6 Non-S Number 0 0 0 0 0 1 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% erious Percent 0% 0% 0% 0% 0% 0.0%	Number 1 3 0 2 0 6 All In Number 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% juries Percent 0% 0% 0% 0% 17% 0.0%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational	0 therefore the Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	r of Non-S Number 1 3 0 2 0 6 6 Non-S Number 0 0 0 0 0 0 0 1 1 0 0 0	Percent 17% 50% 0% 33% 0% 100% erious Percent 0% 0% 0% 17% 0.0%	Number 1 3 0 2 0 6 All In Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% juries Percent 0% 0% 0% 17% 0.0% 0%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury	0 stherefore the Number 0 Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	r of Non-S Number 1 3 0 2 0 6 6 Non-S Number 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% erious Percent 0% 0% 0% 0% 0% 0.0% 0.0% 0.0% 0% 33%	Number 1 3 0 2 0 6 All In Number 0 0 0 0 1 0 0 0 2 2 2 2 2 2 2 2 2 2 2 2 2	Percent 17% 50% 0% 33% 0% 100% juries Percent 0% 0% 0% 0% 0% 0% 33%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury Sexual assault	0 therefore the Number 0 Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	r of Non-S Number 1 3 0 2 0 6 8 Non-S Number 0 0 0 0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% erious Percent 0% 0% 0% 17% 0% 0% 33% 0%	Number 1 3 0 2 0 6 4 11 1 0 0 0 0 1 0 0 0 2 0 0 1 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% juries Percent 0% 0% 0% 17% 0.0% 33% 0%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury Sexual assault Slip and fall	0 therefore the Number 0 Ser Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	r of Non-S Number 1 3 0 2 0 6 Non-S Number 0 6 0 0 0 0 0 1 1 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% erious Percent 0% 0% 0% 17% 0% 33% 0% 0% 33%	Number 1 3 0 2 0 6 All In Number 0	Percent 17% 50% 0% 33% 0% 100% juries Percent 0% 0% 0% 33% 0% 0%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury Sexual assault Slip and fall Transportation	0 therefore the Number 0 Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	r of Non-S Number 1 3 0 2 0 6 8 Non-S Number 0 0 0 0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% erious Percent 0% 0% 17% 0% 0% 33% 0% 0% 0% 0%	Number 1 3 0 2 0 6 4 11 1 0 0 0 0 1 0 0 0 2 0 0 1 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% juries Percent 0% 0% 0% 17% 0.0% 33% 0%	
Table 10	Total NOTE: A confirmed injury report may contain more than one serious injury type confirmed injury types may not equal the number of serious injury reports. Confirmed Non-Serious Injury Reports Documenting Blow to the Head Head-blow Confirmed Injury Reports by Bodily Location Arms/Hands Head/Face Legs/Feet Torso Not recorded Total Confirmed Injury Reports by Cause of Injury as Reported by Patient to CHS Attack by unknown assailant Door/gate closure Environment Inmate on inmate fight Occupational Recreational Self-injury Sexual assault Slip and fall	0 therefore the Number 0 Ser Number 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 0% ious Percent 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%	r of Non-S Number 1 3 0 2 0 6 Non-S Number 0 0 0 1 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0	Percent 17% 50% 0% 33% 0% 100% erious Percent 0% 0% 0% 17% 0% 33% 0% 0% 33%	Number 1 3 0 2 0 6 All In Number 0	Percent 17% 50% 0% 33% 0% juries Percent 0% 0% 0% 0% 33% 0% 0% 0% 0%	

All Injuries

XV. Self-Harm

CHS Self-Harm Report

Reporting Period 3/1/2020-3/31/2020

Table 1	Incidents of Self-Harm by Type (as Determined by CHS Staff)	Number	Percent
	Banged head or other body part	10	9%
	Hang up/attempted hang-up	28	25%
	Laceration	39	35%
	OD on medication/pills	8	7%
	Ingestion	11	10%
	Multiple methods	6	5%
	Other	11	10%
	Total	113	100%

Incidents of Self-Harm by Age at Time of Incident	Banged other bo		Hang Attempte		Lacer	ation	OD medicat	on ion/pills	Inge	stion	Multiple	methods	Otl	ner	Total
orincident	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number
16-17	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0
18-21	1	10%	2	7%	4	10%	0	0%	2	18%	0	0%	5	45%	14
22+	9	90%	26	93%	35	90%	8	100%	9	82%	6	100%	6	55%	99
Total	10	100%	28	100%	39	100%	8	100%	11	100%	6	100%	11	100%	113

e 3	ncidents of Self-Harm by Facility	Banged other bo		Hang Attempte		Lacer	ation	OD medicati	on ion/pills	Inge	stion	Multiple	methods	Ot	her	Total
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number
/	AMKC	3	30%	3	11%	22	56%	3	38%	2	18%	1	17%	1	9%	35
I	EMTC	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0
(GRVC	3	30%	13	46%	7	18%	1	13%	0	0%	0	0%	1	9%	25
I	HOJC	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0
1	VIDC	0	0%	2	7%	2	5%	2	25%	0	0%	1	17%	1	9%	8
1	NIC	1	10%	0	0%	0	0%	0	0%	1	9%	1	17%	1	9%	4
(DBCC	1	10%	3	11%	1	3%	1	13%	5	45%	1	17%	3	27%	15
1	RMSC	1	10%	2	7%	1	3%	0	0%	2	18%	1	17%	0	0%	7
1	RNDC	1	10%	2	7%	4	10%	0	0%	1	9%	0	0%	4	36%	12
`	/CBC	0	0%	3	11%	0	0%	1	13%	0	0%	0	0%	0	0%	4
١	WF	0	0%	0	0%	2	5%	0	0%	0	0%	1	17%	0	0%	3
1	Fotal .	10	100%	28	100%	39	100%	8	100%	11	100%	6	100%	11	100%	113



Department of Correction Table 7

CHS is reporting on 100 serious injuries which were either (1) treated in the clinic during the month of March 2020, or (2) deemed as serious during the month of March 2020.

Of those 100, DOC is reporting on 85 serious injuries which *took place* during the month of March 2020.

DOC & CHS Joint Report on Injuries Occurring in Custody Reporting Period: March 2020 Date of Report: April 24, 2020

Table 7 – DOC

Serious Injuries from March 2020

Overall	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	<u>n= 85</u>
	Mean	2:39	
	Median	1:34	
	Min	0:00	
	Max	16:00	

АМКС	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	n= 28
	Mean	2:45	
	Median	1:07	
	Min	0:12	
	Мах	16:00	

EMTC	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	n= 1
	Mean	3:00	
	Median	3:00	
	Min	3:00	
	Max	3:00	

GRVC	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	n= 12
	Mean	2:02	
	Median	1:20	
	Min	0:24	
	Max	7:10	

MDC	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	n= 5
	Mean	1:09	
	Median	1:01	
	Min	00:35	
	Max	2:15	

NIC	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	n=2
	Mean	0:30	
	Median	0:30	
	Min	0:00	
	Max	1:00	

OBCC	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	n= 17
	Mean	1:58	
	Median	1:48	
	Min	0:30	
	Max	4:10	

Time From DOC Supervisor Notification of SeriousRMSCInjury to Initial Medical Evaluation	Time Elapsed	n= 1
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Mean	5:25	
Median	5:25	
Min	5:25	
Max	5:25	

RNDC	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	n= 11
	Mean	2:40	
	Median	2:25	
	Min	0:40	
	Мах	6:15	

VCBC	Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	n=7
	Mean	1:04	
	Median	0:44	
	Min	0:13	
	Max	3:00	

Richmond Courts

n=1

Time From DOC Supervisor Notification of Serious Injury to Initial Medical Evaluation	Time Elapsed	
Mean	6:05	
Median	6:05	
Min	6:05	
Мах	6:05	