The monthly meeting of the Allegheny County Jail Oversight Board, Thursday, May 5, 2022 held in the Gold Room at 4:00 P.M.

Recording available at <a href="https://www.youtube.com/watch?v=bUde8QiUvK8">https://www.youtube.com/watch?v=bUde8QiUvK8</a> (Each agenda item is time stamped for referencing the YouTube recording)

MEMBERS PRESENT
Judge Elliot Howsie
Bethany Hallam for Councilman Catena
Stephen Pilarski for County Executive Rich Fitzgerald
Terri Klein
Judge Lazzara
Gayle Moss
Ryan Herbinko for Acting Controller Tracy Royston
Chief Deputy John Kearney for Sheriff Kevin Kraus
Abas Kamara

#### Others in Attendance:

Warden Harper Chief Deputy Warden Beasom Deputy HSA of Behavioral Health Renee Madden

#### 1. Welcome, Call to Order and Rules (7:53)

## **Board Chair Judge Howsie (7:53):**

Meeting called to order, roll call was taken, and rules were recited. Judge Howsie requested that the public limit their comments to 2 minutes, as it had been historically prior to pandemic.

Ms. Hallam objected to illegal designees being present and voting for this meeting.

## 2. Presentations (10:29)

## A. Mental Health Tier System (10:29)

#### Renee Madden, Deputy of Health Services Administrator of Behavioral Health:

ACJ implemented the Mental Health Tier System in December 2021 to support interdisciplinary teams on mental health units. It determines levels of care and provide guidelines to support treatment to indicate where individuals are at within psychiatric stability. This is one of the first steps and the foundation in mental health services within the ACJ. Tier system range from 1 (least restrictive) to 5 (most restrictive) that is determined by a clinician's assessment. In terms of risk, clinicians are looking at protective factors and homicidal or suicidal ideation, including plans, means and intent. Clinical recommendations are made for safety precautions for the individual's and others' protection. The interdisciplinary team carries out the recommendations which includes many providers and services. It is a collaboration between custody and healthcare. Ongoing evaluation continue from the treatment team to monitor anything that may not have been observable during the assessment or any changes. The clinical recommendations on safety precautions are often referenced in Chapter 205 referendum as one of the exceptional criteria for emergency use of short-term solitary confinement as medical necessity. In healthcare, evidence of imminent risk of harm is a medical emergency and requires urgent and restrictive intervention. Tiers also determine items allowed in individual cells, recommendations for out of cell time, and guidelines for the documentation and interventions needed at each level of care. Thus far with this program improvement with

overall team communication, collaboration, and coordination of care has been observed. Specific measurable outcomes may be available in the future.

There was further discussion regarding ADA compliance in regard to limiting rec time. The limitations are considered clinically necessary due to safety reasons. Individuals on tier 4 or 5 could be clinically indicated as needing to be on solitary confinement. Judge Lazzara thanked Ms. Madden for her efforts on assisting the incarcerated individual's with mental health diagnoses out of the jail and back to the community.

## B. Chapter 205 Referendum Data Compilation (18:12)

## Joanne Foerster, Director of Performance and Analytics:

A team of people who work with Ms. Foerster, called County Stat, work together to produce the data for the compliance with the referendum on restricting solitary confinement. The team members present at the meeting are Geoffrey Arnold, Erin Dalton, and Wilson Mui. Ms. Foerster provided an overview with some of the definitions that will be more detailed out with Mr. Mui and Mr. Arnold. The county's definition of solitary confinement is restricting an individual alone in a cell for 20 hours or more in a day. They look at individuals in a segregated housing unit, housed alone in a cell and have not been offered at least 4 hours of out of cell time that day. Currently, segregated housing units are 5C, 5D, 5MD, 8E and parts of 1C, 5F, and 5MC. Individuals on medical isolation or suicide watch that are not in these pods are also included in the report. The analysis does not look at any other individuals in general population, as they are not confined to their cell, unless during pod lockdowns. A "day" for this analysis is 7:01am through 7:00am the following day due to shifts of correctional officers and recreation timetable. Anytime an individual is offered out of cell time for recreation, showers, court time, etc. is recorded and is what is used in the calculation. Mental health tiers also come into play in the report.

## Wilson Mui, Criminal Justice Analytics Manager:

Currently, the information detailed by Joanne is pulled together manually as the OMS system does not have a feature available. This includes housing logs, population audit logs, and the activity logs from OMS and the logs provided by the jail. First, the days that need analyzed is determined. Second, jail provides a list of units that are segregated housing units. Last is mental health exclusion tiers. A program was written that takes the logs and identifies the number of hours each inmate was in a segregated housing unit alone per day. Then the review of the activity logs shows how many hours each individual was offered out of cell time per day. That number is subtracted from the number of hours they were in their cell to find all individuals that were in a segregated housing unit alone per day to produce final segregated housing list. Demographic information is added to the give better idea of list.

#### **Geoffrey Arnold, Coordinator of Strategic Analytics:**

OMS system does not have a good way to track activities of incarcerated individuals. A spreadsheet was created for use to track activities on each pod, which is around 210 excel files that are reviewed and analyzed every month. The activity logs track medical status, newly transferred to segregated housing, types of activities offered to individuals throughout the day (i.e. shower, recreation, court appearance, video conferences, etc.). The times are entered into the fields to determine offered amount of time to an individual.

## Wilson Mui, Criminal Justice Analytics Manager:

Quality checks include double checking data in file matches file naming system of pod and date, DOC number is correct and no duplicates, duplicate entries within the same time slot per person, and duplicate logs. Process is done weekly, so that corrections can be made in a timely manner. The jail staff reviews random samples of video to confirm staff is offering the individuals out of cell activity time that was reported.

## Joanne Foerster, Director of Performance and Analytics:

This process is tedious and time consuming to track and record individual movement in and out of cells. In process of procuring the module for OMS system that will track this information and eliminate the use of spreadsheets to track. Also, working on being able to pull out the information regarding the tier designations from electronic health record system directly. These will eliminate some of the burden on individual's involved as well as minimize the risk of human error.

Further discussion regarding the definitions that were provided collaboratively from Senior Management and County Government determined as correct interpretation. Specifically using offered out of cell time and the solitary confinement meaning alone in the cell.

#### 3. Community Corrections Reports (38:18)

## A. Passages to Recovery (38:18)

#### **Kevin Kordzi, Director of Residential Services:**

Passages to Recovery has been working on updating their clinical schedule by adding evidence-based practices for curriculums for services within the agency. Also, they have been bringing in outside providers to offer services, i.e. MAYA, PA Woman's Work, etc. They recently added a new psychiatrist make adjustments to medications as needed for residents until they can get into a community-based program. Everyone has moved to the new location as of April 19<sup>th</sup>. They have been co-ed since then. They now have one floor, with one hallway, and have been able to keep the entire staff through the transition.

## B. The Renewal Center (40:59)

#### Adam Zak:

The Renewal Center had their ACA (American Correctional Association) Audit on April 11<sup>th</sup> and 12<sup>th</sup>. They received a 100%, no deficiencies, on the audit of 32 mandatory standards. They also received 100% with no deficiencies on the audit of 210 applicable non-mandatory standards. The accreditation will take place several months from now. This week is National Correctional Officer and Employee Appreciation Week and The Renewal Center provided perks throughout the week in appreciation. Some of the re-entrants helped with the Pittsburgh Marathon last weekend.

## C. Electronic Monitoring (42:46)

#### Frank Shearer, Director of Adult Probation:

Electronic Monitoring number increased significantly last month. An additional 185 individuals were placed on electronic monitoring since the last meeting. Out of the 185, 114 are pretrial. The increase is higher than usual, which may be attributed to judges getting caught up on dockets from COVID. They can handle up to 1,000 individuals before they will run into equipment and manpower shortages.

The Allegheny County Intermediate Punishment Treatment Plan is required by statute to be presented to the Jail Oversight Board. There was no plan the last 2 years due to COVID. It is required to apply for any Pennsylvania grant funding. The plan is compiled by pulling together statistical information from the jail, electronic monitoring population information, other programs available, request additional funds for future needs, potential impact of the electronic monitoring program, etc.

#### 4. Review of the Minutes for April 7, 2022 (50:04)

The board unanimously approved a motion by Ms. Hallam, duly seconded by Judge Lazzara, to receive the Jail Oversight Board Meeting Minutes from April 7, 2022.

## 5. Old Business (50:30)

## A. Suicide Prevention Sub-Committee (50:30)

#### Warden Harper:

ACJ met with the National Commission for Correctional Healthcare (NCCHC) on May 3<sup>rd</sup>. The NCCHC will present a plan and cost for them to return to review the recommendations they previously made to the jail. It should be around July or August for the NCCHC to return to the jail to conduct their review.

#### **Chief Deputy Beasom:**

Seven of the ten suicide resistant cells are complete and ready to be used, if needed. The three remaining cells are all in the intake department and are waiting on 3 replacement locks.

#### B. Number of tablets currently available for incarcerated individuals (53:00)

#### Warden Harper:

The current tablet count at the jail is 1,462. A majority of the individuals on the mental health unit are not authorized to have tablets. There was a large order of tablets placed.

## C. IIWF Report (54:22)

## i. Update on contract with PA Prison Society Liaison (54:22)

#### Judge Lazzara:

The PA Prison Society and the IIWF committee were unable to come to an agreement for the contract of the liaison position. The IIWF committee is having continued discussions regarding other options for the liaison position, including where the position will be housed. Nothing has been finalized as of yet.

#### ii. Update on compensation for work performed by incarcerated individuals at ACJ (56:12)

### Mr. Pilarski:

As mentioned in previous meetings, there would be potential union issues with it being similar work. The state prisons pay around between \$0.17 and \$0.54 depending on the job. They get paid for 40 hours a week regardless if they work it or not. The JOB currently pays more than that every month with motions to put \$100 on the incarcerated individual's tablet/commissary accounts. If it were decided to go that route court costs and restitution would play a factor in it, which was confirmed by Judge Howsie.

There was further discussion that Ms. Hallam let the Board know that she formally requested the Controller's office do an audit of the workers in the jail, including how many hours they are working. It was requested the Mr. Pilarski compile a list of concerns or issues with paying incarcerated workers for the board to review at the next meeting. Mr. Pilarski clarified that there is not a problem or that he is for or against paying incarcerated workers, just things that need to be addressed. Ms. Hallam recommendation would be to pay the incarcerated individuals the state minimum wage. There was also a discussion regarding payroll taxes needing to be taken out of their pay as well. Ms. Hallam will reach out to the PA DOC for guidance.

# D. Update on if jail inspections being available via written report for the public to access as per the statute (response to Mr. Kenstowicz's public comment last month) (1:06:28)

#### Judge Howsie:

Mr. Kenstowicz pointed out that per the statute the board is required to provide written reports of visits to the jail. Historically the reports have been oral at the jail board meetings. Ms. Hallam recently visited the jail and will provide an oral report as well as a written report that will be posted on the website.

## E. Update on discussion with law department on the jail disseminating information to the board regarding County Police investigations of death's in the jail (1:07:27)

#### Warden Harper:

The jail cannot give any information pertaining to any deaths to the board. When a medical emergency involving an unresponsive incarcerated individual takes place at the jail, the first thing to happen is the correctional officer will begin CPR and call a medical emergency. When the medical team arrives, they will work with the correctional officer to continue CPR until 911 arrives. When 911 arrives or the incarcerated individual is declared deceased, the area where the unresponsive individual was found is preserved for investigation by the County Police. The jail notifies the individual's emergency contact and then the jail oversight board. If a contact is not listed or cannot be found, the jail reaches out to other sources to try to obtain a contact person.

Further discussion regarding providing additional information to the board regarding deaths. Mr. Pilarski offered to work with the Medical Examiner's office to get the cause and manner of death of individual's that have passed away while in the custody of the jail. Statute of limitations for filing a lawsuit as well as HIPAA prevent the jail from providing further information to the board regarding deaths of individuals in their custody.

## F. Update regarding ADA compliance within the jail (1:14:37)

#### Warden Harper:

ADA accommodations can be requested via writing to an employee, verbally tell an employee, or through the electronic request slip. The jail administration and health care team then meet with the individual to determine how they can accommodate them. The jail consults with the county's ADA compliance employee as needed. Ms. Hallam requested the jail bring the ADA compliance employee to the next meeting.

#### G. RFP for commissary vendor (1:17:31)

#### Warden Harper:

Hoping to have the RFP posted by the next jail oversight board meeting. An email will be sent to the board when the RFP has been posted. Pricing will be available to view once the contract is finalized.

#### 6. Public Comments (1:22:12)

#### A. John Kenstowicz (1:22:12):

Concerned about the Jail Oversight Board not being included in the administrative review of deaths at the jail and the lack of information provided to the board. Recommends a JOB member be present at the ACJ administrative review, the clinical mortality review, and the psychological autopsy based off the NCCHC standard (MHA10) and requirements as per the JOB statute.

#### B. Nadia Narnor (1:25:27):

Concerned about the decorum and lack of apathy between board members. Also concerned about another death at the jail since last meeting. Also concerned about community values as only 5% of people in the jail are serving sentences and the rest are community members. Lastly, she would like the public to have knowledge of banned books in the jail.

## C. Tanisha Long (1:28:17):

Concerned about the redefining of words for the referendum. Also concerned with how staffing problems are creating medical problems and multiple deaths in the jail. Also concerned about not getting answers they have been asking for and not being informed in a timely manner of deaths that have occurred. Feels the oversight board is turning a blind eye to problems at the jail. Concerned about the lack of communication to family members from the jail on their loved one's health conditions. Commented on the attendance of the Board members.

## D. Jonas Cabellero (1:31:39):

Concerned with the number of deaths on the jail and the lack of attendance of board members. It was reported to Mr. Cabellero that an incarcerated individual had a rat cooked into his dinner. He was told an incident report was filed by a Sergeant and the family is unable to obtain a copy without a court issued subpoena. Commented on the lack of nutritional value from food in the commissary and the impact on the incarcerated individual's health due to that. Mentioned there has been a number of citations from the health department for the ACJ kitchen. Concerned about the dietician that approves the diets and the menus at the jail.

#### E. Bailey Brown (1:35:56):

Concerned about the conduct of the warden, ACJ staff, and the Board. Also concerned that public comment is not being made accessible for all who wish to participate and is not a priority. Commented on the rules being too rigid.

## F. Marion Damick (1:39:11):

Commented on how the county gets most of its money from taxpayers and a great amount of that goes to the jail. Concerned on board members lack of attendance. Also concerned about the unwillingness of releasing information to the public. Concerned about the lack of action from the board.

- G. Public Comments via email (1:43:40): Summarized by Judge Howsie.
  - i. (1:43:44): A 14<sup>th</sup> person has died in the jail. Concern about the job that Warden Harper and Rich Fitzgerald are doing and their failure to take issues seriously.
  - ii. (1:44:10): Concerned with the lack of treatment for non-violent criminals with mental health diagnoses and shortages of medications in the jail. An incarcerated individual could not get access to his medication and was put in isolation on the mental health floor after bringing the issue up to his case worker and psychiatry to receive help.

Warden's Response: There are several mechanisms that can be utilized to advise the jail of any urgent issue pertaining to the incarcerated individuals. The comment lacks the name necessary to research what he can do to take care of this individual. The constituents can reach the jail via phone number 412-350-2000 or send an email through the website by clicking contact to send a message.

iii. (1:45:55): There are a great number of families in the county affected by mental illness. Thanked the Warden for recognizing the number of people with mental health conditions in ACJ and for the training provided to the staff regarding mental health issues. Concerns with the number of staff there to provide counseling to the mental health population. Wonders if there is a possibility to train support staff, counselors, guards, or volunteers.

Warden's Response: There have been training and they continue to look for mental health professionals and specialists to work at the ACJ. Just recently was a virtual job fair. Urges people if they know someone who wants to apply to submit their application.

Further discussion regarding who responds to calls and emails that come in. There is a person that answer emails and people to answer calls so that they can respond to calls and emails daily. There are voicemail capabilities.

iv. (1:47:57): Wanting to know what exactly Torrance is and how their mental healthcare services differ from the services the ACJ provides.

Renee Madden's response: Incarcerated individuals can have court-ordered competency evaluations, which are done by a psychiatrist, where they could be found incompetent to stand trial. They would receive a commitment to Torrance State Hospital through a commitment hearing before a judge. Torrance offers specific services related to competency restoration versus the jail that care for symptomology. Once a person reaches restoration, they can return to ACJ where they can move through court proceedings or release. They are sometime released from Torrance to a different treatment community.

Further detail was given regarding Torrance. Stays can vary from months and individuals are sent for competency restoration, not to serve a sentence. Efforts to restore people to competency and if that does happen then they are transferred back to the jail. Torrance is the only mental health facility used by the ACJ. Torrance takes people from various counties. If people are rendered incompetent, then their cases are dismissed and can go to an LTSR which is a locked treatment facility or a CRR which is a community setting. There are only two state hospitals which creates a lack of beds which is the main reason people are waiting to be transferred to Torrance.

v. (1:55:23): Concern about medications not being delivered in a timely manner or an option to give the medications earlier in the day. Concerned about what the jail has done to ensure individuals are getting their medication in a timely fashion.

Wardens Response: The jail has reviewed many options to include the suggestion in the email but the nurses preparing the medications must make sure that they are within the regulations when doing these different options.

vi. (1:56:19): Wonders what type of programming is offered by the jail to inmates in segregated housing or on disciplinary status and what kinds of programs are available to inmates on the mental health pods.

Warden's Response: Inmates are offered GED and re-entry services that include Parenting and Thinking for a Change. The incarcerated individuals must be approved by a doctor to participate in these programs.

## 7. Warden's report (1:57:00)

#### Warden Harper:

Announcements: This week is Correctional Employee's Week. The jail had a steak day, a memorial service yesterday, ice cream day, donut day, etc to celebrate the profession.

Recreation: Full recreation has been implemented at the jail on May 2<sup>nd</sup>.

Books at the jail: Books not permitted into the jail are hard cover books, books with plastic or wire bindings, books containing pornography, sexually explicit material or nudity, advocate violence, weapons, firearms, ammunition, directions for making explosives, and books deemed to compromise the safety and security of the jail. The list will be posted on the website.

Election: 27 incarcerated individuals have expressed interest in vote in the Primary Election. Absentee ballots are accepted until May 10<sup>th</sup>. Voting at the jail will take place May 12<sup>th</sup>.

Discussion regarding books available on the tablet. Deputy Toma informed the board that the tablet program for the books is called Overdrive. The subscriptions for some books have expired due to the checkouts have been exhausted or the time period has expired. The jail is working on renewing those at this time.

Discussion regarding the referendum. The warden stated they are not approaching solitary or lockdown differently aside from the reporting.

Ms. Hallam requested a copy of a report that she heard Chief Deputy Zetwo wrote about things that needed addressed at the jail based off his experience.

Ms. Hallam spoke about, Brian Englert, the union president's inability to attend the meeting due to needing to start his scheduled shift on time to avoid disciplinary action. Mr. Englert has informed her that they still do not have a sign off for new uniforms. Warden Harper let the board know the shortage of uniforms is due to supply and demand issues. They plan to continue to stay with the current uniform vendor because shortages are happening across all vendors.

Ms. Hallam requested Warden Harper to provide a number of individuals at the jail that are waiting to go upstate at every meeting.

Ms. Hallam also requested a legal opinion from the county's legal department regarding the jail's compliance with the solitary confinement referendum. This was requested at last meeting with a motion. Judge Lazzara requested to receive something in writing prior to the next meeting. Ms. Klein emphasized that the opinion should include the definition of solitary.

Discussion regarding bringing back AA and NA meetings to the jail. The jail needs to come up with a process to provide these meetings again with COVID still here.

Discussion regarding commissary limit was lowered from \$175 to \$150. It was lowered due to space available in the cells to store commissary. Many incarcerated individuals rely on commissary only for food. Too much food in the cells can cause safety and security issues as well as attract rodents.

Ms. Hallam requested a follow up to make sure the inmates are getting the money on their commissary for COVID vaccines and boosters.

There was discussion regarding housing new courts in with the incarcerated individuals that have been in the jail for some time, specifically females. These new entrants could potentially be bringing in contraband and causing overdoses of females hat have been in jail for some time. The jail is unable to accommodate opening up a pod for new courts at this time, since the number of females coming in is minimal. They will look at it in the future.

## 8. Chief Deputy Warden's report (2:17:13)

## A. Staffing promotions and hiring (2:17:13):

#### **Deputy Warden Beasom:**

Warden Harper and Deputy Warden Beasom wishes the men and women serving at ACJ a happy corrections employee's week. There were 659 individuals that completed a mental health first aid training, conducted in conjunction with DHS, and are now certified. On May 9<sup>th</sup> Mr. Joel Robbins will be onboarded as a Sergeant. There

are currently 10 cadets in the corrections officer academy, slated for graduation on June 24<sup>th</sup>. Over the past 2 weeks there have been 10 physical agility tests held. There were 81 applicants who applied for the test and 38 participated and 43 were no-shows. Of the 38 participants of the test 8 failed. Of the remaining 30, 4 failed background clearances. Of the remaining 26, 13 have passed background clearances and 13 are still pending. After passing the background clearances they will be invited to the written exam. The next supplemental cadet class is expected to begin in early July 2022. Deputy Warden Beasom noted that the application process recently changed a few months ago, with the physical test now taking place before the written test in hopes that it would produce better candidates. They are unsure if this has had any meaningful impact, but there has been an increase in the number of applicants. There are 4 more candidates that are expected to participate in the agility test next week after having to have the test rescheduled. The job hiring process for officers is believed to be now more streamlined than it was in the past and the Wardens are hoping to make job offers more quickly. It is expected that the number of healthcare job vacancies will be reduced by next month due to increased hiring efforts.

## B. COVID update (2:22:40):

#### Renee Madden:

To clarify part of her earlier report, the advanced practitioners are not employed by the county. They are contracted. Also, tier 4 is also included in having limited out of cell time.

Incarcerated Individuals: Total amount of incarcerated individuals tested for Covid-19 during April 2022 was 1,686. Of those, 19 or 1% were found to be positive. There are 10 incarcerated individuals presently positive in the facility and 0 are hospitalized from Covid-19. An overall positivity rate is 1.4% at the Allegheny county jail since the first diagnosed case of an incarcerated individual on April 6,2020.

Employee: Throughout the pandemic, 254 staff have reported positive results. Presently have 2 individuals who continue through the recovery process and have not yet returned to work.

Vaccination: Thus far, the ACJ has supported vaccination of over 2,662 incarcerated individuals and provided over 539 booster vaccines. On site there is Pfizer, Moderna, and Jansen vaccines stored. Last month it was reported that 802 individuals received their full series. This month we have 647 (42% of incarcerated individuals) that have completed their series.

## C. Medication Assisted Treatment (2:24:41):

## Ms. Madden:

The ACJ continues to provide medication treatment for opioid use disorder and alcoholism to treat incarcerated individuals by offering Naltrexone, Vivitrol, Suboxone and Sublocade. In April, there were 30 individuals prescribed oral Naltrexone, 1 being released to the community who received their Vivitrol shot prior to leaving. In April, there were 93 treated with Suboxone and 13 were treated with Sublocade, totaling 106. There is continued efforts in contract expansion with Tedesco for Methadone treatment. They are actively developing implementation of continuation of services for individuals coming into the facility. There is no implementation date as of yet.

#### D. Tracking commitment to Torrance (2:25:47):

#### Ms. Madden:

In April, there were 9 patients were admitted and transferred to Torrance State Hospital. There were 10 new patients committed during the month. There are 10 who are awaiting admission. The longest waiting is from February 2022.

There was discussion as to why the Medical Director does not attend the meeting. Warden Harper informed the board that the Medical Director is not an employee of the county, he/she is contracted through AHN. The jail has county employees report on the status of the county jail's health care department.

Substance use programming is in the works of getting back to being in-person, in lieu of packets being provided to the cells. There is not start date to report as of yet.

Discussion regarding medical staff at intake. At times, there are some shifts where the jail does not have health care staff in intake due to approved leave of employees. MOUD may be provided at intake if it is deemed necessary by the medical provider. The jail uses a program called Sure Script which tells them what medications an incarcerated individual has been prescribed.

Discussion regarding shortages of psychiatrists. The warden informed the board that they have been interviewing psychiatrists recently.

Ms. Klein requested the number of individual's that are tier 4 and tier 5 be reported on the monthly report.

#### 9. New Business (2:31:30):

## A. Motion for IIWF monies to be put on incarcerated individual accounts (2:31:30):

#### Ms. Hallam:

Motion to request money from the IIWF to be put on the joint tablet commissary accounts of each person incarcerated at the ACJ.

The board unanimously approved a motion by Ms. Hallam, duly seconded by Mr. Herbinko, to request money from Incarcerated Individual's Welfare Fund to be put on the commissary and tablet joint account of each incarcerated individual (1,550 individuals x \$100.00 = Total \$155,000).

## B. Report on jail visit (2:32:12):

#### Ms. Hallam:

This past Sunday, at approximately 5 PM, Ms. Hallam visited the jail. Ms. Hallam started her visit at intake and spoke with individuals who were being held there. Ms. Hallam noted that there was no clearing of intake occurring as there was no medical staff member present. Ms. Hallam also observed that there had been individuals in holding that had arrived on Thursday morning and were only waiting for a drug test to be administered. Ms. Hallam then visited pod 1C, a female's max security pod. Ms. Hallam noted that the inmates there brought up concerns for menstrual products and heroin being brought into the jail that was laced with fentanyl. The inmates noted that overdoses are occurring every couple of weeks and seem to be increasing recently. Inmates that have been there for longer periods of time state that the majority of drugs are being brought in by "new courts", which are newly incarcerated individuals, and that when an overdose occurs it shuts down the entire pod, which upsets longer staying residents who may also be struggling to stay clean. Ms. Hallam then went to pod 3B, which is men with medium maximum security. In total Ms. Hallam stayed for approximately 5 hours. Ms. Hallam express that at all 3 locations she visited, inmates were asking for the previous commissary provider, Keefe, to be brought back. Ms. Hallam also said that approximately 2/3 of the inmates she talked to said they were skipping meals and exclusively eating from commissary. Inmates produced receipts they had kept from commissary purchases and showed them to Ms. Hallam, noting that they were much more expensive than Keefe's prices. Ms. Hallam expressed concern over having the commissary and meals be prepared by the same provider since it may be a conflict of interest. Ms. Hallam was also present when dinner was served in pod 3B and said that the dinner plates

did not match what was supposed to be served according to the menu and that it was instead ground up bologna, uncooked hash browns and two cakes. Ms. Hallam stated that the food was "disgusting" and that when she had previously visited the dinners looked very different. Ms. Hallam also reiterated a previous issue that had been brought up, in which some inmates may order commissary items and when they go to retrieve them, they are missing items and never refunded. Some inmates also told Ms. Hallam that they had still not received money for receiving their COVID-19 vaccines and booster shots. Ms. Hallam will be typing up a full report and putting it into the record as per the statute.

## 10. Adjournment (2:45:24)

Chief Deputy Kearney made the motion to adjourn, duly seconded by Mr. Pilarski. The meeting adjourned approximately 6:50pm.

Kind regards,

**Tracy Royston** 

## **May 2022 Jail Oversight Board Public Comments**

## **Medical/Health**

#### Name: Garret Wassermann

Comment: A 14th person has now died at the ACJ. As an Allegheny County resident and taxpayer, I am demanding Warden Harper be removed from his position immediately. The JOB and County Executive Fitzgerald must take this seriously. We've had years of reports of human rights violations at the jail at this point, why has there been no action?

#### Name: Jennifer S

## Organization(s): Loved one of an inmate

Comment: As someone who has never had to deal with the criminal Justice system or the jail, in any county, let alone Allegheny, I am in pure disgust and outrage at the lack of/ZERO treatment there is for nonviolent criminals with mental health diagnosis. Some of these diagnosis so severe that resulted to their arrest. Someone very important to me is a current inmate. He has completely missed his psychiatric medications due to shortage or had them given way beyond when needed. He spent 4 days in isolation on the mental health floor for asking for his medications. He has reached out to his caseworker, and psychiatry so he could receive help. The worst part is, that jail does not offer help for inmates with mental illness and I demand to know why.

#### Name: Samuel Johnston

Comment: So many families in our community are affected by mental illness. I want to thank the warden for recognizing that ACJ has a large population of people with mental health conditions and for the training he's provided to staff in mental health first aid to improve interactions with them. The October warden's report says there's only a few mental health specialists and 1 psychiatrist. It doesn't seem like there's enough people to provide counseling to the mental health population. Is it possible to train support staff, counselors, guards, and volunteers to provide inmates therapy either at the jail or by phone?

## Name: Nancy Smith

Comment: I recall a jail official saying there are several inmates with mental problems waiting to be transferred to Torrance. What exactly is Torrance and how do their mental healthcare services differ from the services the ACJ provides?

## Name: Jay Jones

Comment: Several Board members have talked about medications not being delivered on time to inmates. Has the jail considered other options to fix the delay, like preparing the medications for the inmates earlier in the day so they are ready to be passed out to inmates when it's time to deliver them?

#### **Programs in ACJ**

#### Name: Sarah Lezah

Comment: What type of programming is offered by the Jail to inmates in segregated housing or on disciplinary status? What kinds of programming is available to inmates on the mental health pods?