

The Correctional Association of New York

FOUNDED 1844

2090 ADAM CLAYTON POWELL, JR. BLVD. • SUITE 200 • NEW YORK, NY 10027
TEL. (212) 254-5700 • FAX (212) 473-2807 • www.correctionalassociation.org

SING SING CORRECTIONAL FACILITY

The Correctional Association (CA) visited Sing Sing Correctional Facility on April 27 and 28, 2009. Sing Sing is a maximum security prison located in Ossining, New York, 35 miles north of New York City. At the time of our visit, the facility had an inmate population of 1,730 men, 1,579 of whom were in general confinement, and a capacity to house 1,803 men. The population decreased from 2,300 inmates at the time of our last visit in 2003, largely due to the closing of the facility's "Tappan" building. The facility also has a 30-bed Special Housing Unit (SHU) for inmates in disciplinary confinement, which held 24 inmates at the time of our visit.

Sing Sing has a number of educational, vocational and treatment programs. Special mental health programs that service the entire state include an Intermediate Care Program (ICP) and Transitional Intermediate Care Program (TRICP) for inmates with mental illness, a Residential Crisis Treatment Program (RCTP) for inmates experiencing serious mental health crises, and a Community Orientation and Reentry Program (CORP) for inmates with mental illness who are preparing for release. At the time of our visit there were 62 inmates in the ICP, 18 in the TRICP, and 16 in the RCTP. During a January 2011 conversation with staff, we learned that the RCTP dorm capacity was reduced by four beds, leaving the total capacity of the facility at 1,799 inmates. The population in January 2011 was 1,757 inmates.

In the six years since the Correctional Association last issued a report on Sing Sing, the Returned Parole Violator's program (RPV) no longer exists and the infirmary was relocated. The facility did not have any new construction projects planned but at the time of our visit, several building upgrade projects were underway. These projects included refurbishing the kitchen facilities, expected to be completed within 18 months of our visit. The Department of Corrections (DOCS) also planned to upgrade the prison's electrical system. Sing Sing's physical plant presents challenges for inmates and staff moving from one area to another since many programs are only accessible by walking long distances, often up many stairs or steep inclines. Staff informed us during the January 2011 conversation that the kitchen renovation was still under way and was only 65% complete due to some wiring issues and asbestos discovered during the construction. Additionally, the projected completion date for the electrical system upgrade was May, 2011. Recently completed projects included replacement of a vocational program area roof and rehabilitation of the chapel.

The objective of our visit was to assess both general conditions and programs at the facility and in particular its substance abuse treatment programs. We received 284 surveys from general population inmates about general prison conditions, 14 surveys from inmates in the ICP, and five from inmates in the SHU. We also received 90 surveys from inmates about their need for substance abuse treatment and 28 additional surveys about substance abuse treatment programs at Sing Sing. These surveys and our evaluation of the substance abuse programs at Sing Sing will be published in a forthcoming report on substance abuse treatment in the New York prison system and therefore have not been used in this report. This report is based on inmate surveys, data provided by the facility, conversations with the Superintendent, executive team, union representatives, the Inmate Liaison Committee (ILC), the Inmate Grievance Review Committee (IGRC), program staff and inmates, observations made during our visit, and inmate correspondence. Facility administrators had the opportunity to review a draft of this report and provided the CA with additional information and comments during a conference call on January 11, 2011. Their comments and updated data have been included in this final report.

Summary of Findings and Recommendations

The Visiting Committee was impressed with many areas at Sing Sing: high inmate satisfaction with the college program and the Transitional Services program, particularly the Aggression Replacement Training program; treatment of inmates infected with hepatitis C; positive inmate reports regarding mental health care at the prison; and SHU inmates' access to mail, reading materials, law library services, and recreation.

We also noted some problems: long waiting lists for educational and vocational programs; problems receiving mail and packages; limitations on access to medical care; verbal harassment and physical confrontation between staff and inmates and among inmates; and gang activity and use of contraband drugs in the prison.

Our recommendations include that state policy makers should work with DOCS and the facility to implement the following:

- Fill all academic and vocational program staff vacancies.
- Increase the capacity of the educational program, including the post-secondary education curriculum, and enhance and expand the number of vocational courses offered.
- Review the processing and treatment of visitors and improve access to the Family Reunion Program.
- Promptly fill all medical staff vacancies, including in the dental department, and improve access to sick call, clinic call-outs, medications and specialty care services.
- Expand the training for corrections staff throughout the prison and the inmate population on issues related to inmate mental health care in order to improve staff interaction with inmates and the relationships between general population inmates and inmates with mental illness.
- Assess the level and causes for tension within the prison and develop a plan to reduce tension and incidents of verbal harassment, including diversity training for staff and inmates.

- More closely monitor allegations of sexual abuse by staff and/or inmates and meet with the ILC and IGRC to explore how to reduce sexual abuse and how to promptly identify and respond to staff sexual misconduct when it does occur.
- Develop and implement additional measures to reduce gang participation and drug usage in the prison through non-punitive methods.
- Meet with the ILC and IGRC to discuss ways to reduce tension at the prison and to improve the effectiveness and credibility of the grievance system among inmates.

Sing Sing's General Inmate Population

According to DOCS 2008 Profile of the Inmate Population, 13% of inmates at Sing Sing identify as White, 56% as African-American, and 30% as Hispanic compared to 21%, 51%, and 26%, respectively, statewide. The median age was 38, comparable to the statewide median of 36. Substantially more inmates (85%) came from New York City and its suburbs than in other facilities throughout the state (64%). At Sing Sing, 58% of inmates have minimum sentences of at least 10 years, consistent with 57% at other maximum security prisons.

The majority of inmates at Sing Sing (79%) were convicted of a violent crime and 10% were convicted of drug offenses, figures significantly different from the Department-wide levels of 58% for violent crimes and 21% for drug offenses. Thirty-nine percent of Sing Sing inmates had served a prior prison term, slightly greater than the statewide average of 35%. Only 55% of inmates face an earliest release date within two years, compared with 65% in state prisons throughout New York. A little less than half of inmates (43%) have a high school diploma or GED, compared to 51% statewide. Six percent of inmates speak Spanish with limited or no ability to speak English, similar to the statewide percentage of five percent. DOCS identified 81% of inmates as having some substance abuse history, comparable to the statewide average of 84%.

Programs

At the time of our visit, 1,403 inmates (89%) had full-time programs and 170 (11%) had half-time programs. According to the data provided by the facility, only 151 inmates, or about 10% of the general prison population, were not involved in any program or job assignment. Of the general population, 486 inmates (31%) held jobs as porters. More than half of the population (78%) held non-porter and non-industry jobs and few (6%) worked outside the prison. Half of the inmates we surveyed (50%) were satisfied with their job, a rate comparable to that at other prisons we have visited. Inmates who held jobs as porters expressed frustration that their job was not challenging. Porter positions involve performing maintenance and cleaning tasks and generally do not help individuals to develop transferable skills. Although the percentage of Sing Sing inmates who are porters is similar to the rate at other facilities we have visited, we are concerned that this large group of inmates is not being offered more meaningful employment in the prison. During our January 2011 conversation, staff attributed the high number of porter positions to the large inmate population at Sing Sing, and explained that porter positions are typically transitory, with opportunities for inmates to change positions at a later date.

At the time of our visit, inmates told us that it is difficult to obtain placement in an academic or vocational program at Sing Sing and that they frequently had to wait for very long

periods of time before being assigned to a class. This difficulty may be compounded by the fact that Sing Sing integrates a rolling population of 300 inmates who are held at the prison only until space becomes available in other maximum security facilities. These inmates, who stay at Sing Sing for weeks or months, are eligible to participate in the facility's programs but are removed from them when they are transferred.

At the time of our visit, there were ten inmates working in the commissary, which services approximately 180 inmates each day. The area has a waiting room with a window where inmates fill out a sheet with items they wish to purchase and then wait to be called to another room to receive their items. Though data taken from inmate surveys show that Sing Sing inmates are slightly more satisfied with the commissary than at many other prisons we have visited, only 37% reported feeling satisfied with the commissary program even part of the time. As in many other prisons we have visited, inmates frequently cited high prices as a problem at the commissary. Inmates' wages have not risen in nearly 30 years, and prices at the commissary continue to rise with inflation, making it very difficult to purchase items.

Academic Program

Sing Sing offers classes in Adult Basic Education (ABE), Pre-General Equivalency Diploma (Pre-GED), General Equivalency Diploma (GED), and English as a Second Language (ESL). The facility also offers cell study programs for inmates in the SHU. Of the nine academic instructor positions authorized by DOCS, there were three vacancies, including two since 2008 and one since 2007. We were informed that because one of the two ABE teachers retired in 2008, the program could only accommodate a small number of students. The facility was operating under a hiring freeze at the time of our visit, but educational staff noted that when they are authorized to hire, Sing Sing vacancies are often difficult to fill because salaries for teachers in the community are greater than DOCS' salaries. The facility does not offer any classes specifically for Spanish speakers, and only one member of the academic staff, the ESL teacher, is bilingual. Staff told us that they believed the facility would benefit from more teachers, particularly special needs and bilingual teachers.

One hundred and seventy-three inmates were enrolled in academic programs. There were two ABE classes operating at the time of our visit, one in the morning and one in the evening. Each class had 18 students and, according to staff, was always full. According to staff, about half of the students in ABE were on the Office of Mental Health (OMH) caseload. Some staff members reported experiencing increased difficulties teaching students with mental illnesses.

The educational area appeared satisfactory, with large classrooms containing plenty of windows, individual school desks, blackboards, and posters on the walls. We observed, however, that it was frequently hot inside the classrooms despite the presence of fans. The facility has two computer labs. One has 18 computers and is used as a teaching classroom. The computers in this lab are equipped with Windows 98 or XP as well as reading and language programs. All of the academic classes use the lab once or twice each week. The second lab is equipped with 20 computers and is used for the college program.

DOCS policy mandates that inmates who do not have a GED earn one while in a correctional facility. However, because of a shortage of instructors and of space, DOCS

generally does not prioritize the program waiting list based on educational need but on a prisoner's earliest possible release date. Staff told us that as a result, the waiting list for academic programs is extremely long. Inmates reported that they often wait a year to be placed in a class. The GED exam is given at the facility three times per year. Each June, the facility has a graduation ceremony for inmates receiving their GEDs with caps and gowns, music and food in the visiting pavilion, to which inmates' families are invited. In 2008, 52 inmates took the GED and 58% passed, while in 2007, 72 inmates took the exam and 49% passed, an average somewhat lower than the passage rate of 55% that we have found at other prisons. Staff explained that in the past they administered the GED exam to a higher number of students, but now they only offer the exam to those whom the educational staff believe are ready for the test. Considering the delays in enrolling inmates in school and the large waiting list, we are concerned that the facility is limiting the opportunity for inmates to advance academically, perhaps preventing individuals from qualifying for jobs or other activities because they do not meet educational requirements.

Sing Sing offers a number of post-secondary educational classes through the participation of outside universities. Mercy College offers a program through which inmates take classes earning credit toward a Bachelor's or Associate's degree in Human Behavior. To participate in this program, inmates must have a GED and three prior college credits. At the time of our visit, Mercy offered four classes, each running for 16 weeks and meeting Monday through Thursday, and had a total of 126 students. Staff explained that Mercy College will continue to add classes based on the number of inmates interested in and eligible for them. New York Theological Seminary also offers inmates the opportunity to work towards a Master's degree in Professional Studies.

Of the inmates we surveyed, 58% were satisfied, at least some of the time, with the academic programs offered at Sing Sing. This rate is comparable to other prisons we have visited. During our visit, inmates told us that they would like to see more educational programs. Many inmates with whom we spoke were particularly satisfied with the college programs and cited them as the best feature of the prison.

We were pleased to learn during our January 2011 conversation that Sing Sing had started a post-secondary certificate in September 2010, offering five courses over one year. The program had a capacity of 25 inmates and administrators hoped that the last course of the sequence would qualify inmates for the Mercy College program. We also learned that in response to recommendations provided following our visit, the facility had reassigned teachers to better meet the academic needs of the inmate population. Accordingly, staff were removed from underpopulated GED classes in order to double the number of ABE classes. Furthermore, the facility increased GED eligibility by permitting ninth grade-level inmates not currently enrolled in an academic program to take the GED pre-test.

In January 2011, six of nine academic instructor positions were filled. Staff explained to us that the three April 2009 vacancies had been filled following our visit, however three additional instructors retired in August and September 2010. At the time of our conversation, staff had submitted requests to DOCS Central Office and were awaiting waivers to fill the positions.

Vocational Program

Sing Sing has the capacity to run nine vocational classes but only seven were operating at the time of our visit. The facility's print shop closed in 2007, and the computer operator class closed in March 2009 due to two staff vacancies. Available classes included building maintenance, computer repair, custodial maintenance, electrical trades, small engine repair, welding, and plumbing/heating. The computer repair class replaced the facility's general business class because teaching computer repair requires only an Associate's degree, making it easier to hire teachers. The facility has seven full-time vocational instructors, most of whom had been teaching at the prison for many years. At the time of our visit, we were told by staff that the facility had not received authorization to fill the vacant positions. None of the vocational instructors spoke Spanish, and all relied on inmate-teachers' aids to communicate with Spanish-speaking inmates with limited English skills.

Sing Sing offered four Department of Labor (DOL) apprenticeship programs, including small engine repair, asbestos abatement, and two programs in electrical trade. We were pleased to learn that 13 inmates received their DOL certificates in 2007, a high number compared to most other CA-visited prisons, although no inmate had received certification since 2007. Sing Sing offered two apprenticeships with the National Center for Construction Education and Research (NCCER), a not-for-profit organization that standardizes curricula and credentials for the construction and maintenance industry. Two certifications were issued in 2008.

Many inmates on the mental health caseload follow regular vocational programming, although some inmates on the OMH caseload take medication that prevents them from participating. Vocational program staff told us that they maintain a close relationship with the OMH staff. Staff reported that behavioral problems do not typically impact the classroom.

At the time of our visit, there were 235 inmates enrolled in vocational programs. Staff told us that in general, the vocational program maintains long waiting lists for its programs, which are prioritized according to earliest release date. According to information provided by the facility, 482 inmates had a vocational program on their recommended program list. Inmate satisfaction with the vocational programs at Sing Sing was mixed, with 54% of survey respondents reporting that they were satisfied with the programs at least sometimes, and 46% unsatisfied. These rates are lower than the 63% satisfaction rate that we have found at other prisons. Inmates told us that they would like to see more vocational classes at Sing Sing. Vocational staff noted that the program could benefit from upgraded equipment as it is challenging for classes to remain current amid technological advances.

Facility administrators informed us during our January 2011 conversation that one staff member retired and the position was filled, however the other two vacancies remained unfilled.

Transitional Services

At the time of our visit, Sing Sing's Transitional Services (TS) program offered Phases I and III, and Aggression Replacement Training (ART) classes. While outside groups sometimes conduct presentations in the TS classes, we were told that they have been doing so less frequently at Sing Sing due to budget cuts. Inmates reported that presentations by the Osborne

Association and the Doe Fund's Ready, Willing, & Able program were among the most helpful. The TS program maintains a staff of three civilians and five inmate program assistants (IPAs), three of whom were bilingual. Most of the Phase I and III classes were facilitated by the IPAs. To become an IPA, an inmate must have a high school diploma or equivalent, complete a two-week training course, and then apply for the position.

At the time of our visit, there were 21 inmates enrolled in Phase I and none on the waiting list. The class was facilitated by three IPAs. The class runs all day for two weeks and targets inmates who are new to DOCS, addressing topics such as the prison's programs and administrative services, men's health, and peer pressure. Phase III is a 90-day, five days per week, half-day program with an open admission policy that uses the DOCS curriculum. The goal of the program is to prepare inmates for release, and topics include family reunification and community resources. The waiting list is determined by the inmates' earliest release date. The Phase III program has a capacity of 50 at a time, with 28 inmates enrolled at the time of our visit. According to data provided by the facility, 1,559 inmates had the program on their recommended program list.

TS staff assist inmates in Phase III with obtaining their birth certificates and Social Security cards before release. According to staff, inmates are generally placed in Phase III approximately six months before they appear before the parole board or are scheduled to be released. All inmates leave Sing Sing with at least temporary identification documents. To help inmates find housing, TS staff may conduct computer research and make preliminary phone contact, in addition to providing workbooks and pamphlets containing housing information. Facility rules prohibit IPAs and staff from contacting released inmates. There is a computer outside of the TS classroom available for all TS inmates to use. Staff told us that TS could benefit from more resources, particularly information about services and programs in upstate counties.

Inmates' reactions to the TS program at Sing Sing were generally positive. Twelve percent of the inmates we surveyed had taken part in Phase III, 70% of whom reported being satisfied at least some of the time. Twenty percent of the inmates we surveyed had participated in ART, 94% of whom were satisfied with the program at least sometimes.

Staff informed us during our January 2011 conversation that the Phase II program was replaced by Thinking for a Change (T4C), a cognitive behavioral therapy program developed by the National Institute of Corrections. T4C has been running at Sing Sing since January 2010 and has a capacity of 20 inmates per class. The facility trained eight existing staff members to run this program and expected to have all correction counselors trained in the new curriculum by December 2011.

At the time of our 2009 visit, the facility was planning to offer a program seeking to prepare residents of urban areas for release. This program was intended to help inmates to develop resumes and offers a DOL database to help them search for jobs. We learned during our January 2011 call that the facility had begun operating the New York Release Entry Program (NYREP), a community-based program serving inmates who will be released to an area extending from Newburgh to Long Island, including all the southern counties. This program, which addresses such issues as resume writing and job placement, is available to inmates who

are within 90 days of their release date. For those inmates who have not yet completed Phase III, completion of the NYREP program can serve as a replacement.

Libraries

The general library was closed at the time of our visit because the single full-time librarian was on short-term temporary leave. We learned that while the library's hours vary, it is typically open on Mondays and Wednesdays from noon to evening, and on Tuesdays, Thursdays, and Fridays from morning to afternoon. Sing Sing runs a program with the Westchester library through which inmates may obtain books not available at the facility library. The prison also subscribes to various newspapers and magazines that are received within a week of their issue. Inmates may use the library's computers, which are not equipped with internet access. Corrections Officers (COs) make rounds at 11:30 a.m. daily for notary or library call outs, when inmates are permitted to browse the library stacks. Overall, the inmates we surveyed seemed satisfied with the general library, with 57% reporting satisfaction at least sometimes; this is slightly lower than the other prisons from which we have collected data. However, inmates often remarked that they were dissatisfied with the selection of books available. In particular, they said that many books were outdated and that there were not enough books on educational subjects. Inmates also said that it often takes a long time to obtain permission to go to the library.

Inmates reported that they made frequent use of the law library, which was open every day and evening. The law library was staffed by a CO, and there was a relief clerk who staffs the library when the CO is unavailable. Additionally, Sing Sing maintained a staff of 17 inmate law clerks at the time of our visit, five of whom spoke Spanish. A legal research course is offered each April to train inmates as law clerks. All clerks start out as window clerks, answering inmates' questions and retrieving books. Overall, surveyed inmates seemed satisfied with the law library, with 57% reporting satisfaction at least some of the time. This number is comparable to the overall average rate at other CA-visited prisons. Inmates with whom we spoke told us that the law library would benefit from more computers and noted problems with access to notary services.

At the time of our visit, the law library contained four computers for the law clerks and typewriters and ink cartridges for other inmates. We were pleased to learn during our January 2011 conversation that the facility had installed a computerized law library system with 31 terminals available for inmate use that has been operational since July 2010.

Other Programs: Visiting, Mail/Package, and Food Services

Visiting Area

The Visiting Committee toured the visiting area, which is large and accommodates between 140 and 150 inmates and their visitors. The visiting room offers vending machines and has a children's area with a capacity for 22 children. The outdoor visiting area is used on weekends from May through September. Legal visits take place in a separate area with cubicles.

Of the inmates we surveyed, 60% were at least somewhat satisfied with the visiting program at Sing Sing. Many inmates noted that one of the best things about Sing Sing was its

proximity to New York City, making it easier for their families to visit them. Unfortunately, however, we also received numerous complaints about visiting conditions, with some inmates saying that the Sing Sing visiting program was one of the worst they had experienced. Inmates reported that COs were sometimes verbally abusive towards visitors, using profanity and threatening gestures towards them and generally failed to treat them in a respectful manner. Inmates noted a general lack of professionalism among the staff at the visiting program and told us that there were longstanding problems with particular COs. Several inmates mentioned that they had seen COs follow female visitors to give them their phone numbers. Inmates also complained that it often takes two to three hours to process visitors through security. Inmates also said there was a problem with the ION detector, a device used to detect the presence of narcotics, in that the device frequently reported false positives on their visitors.

Following our visit, we received several complaints from inmates expressing concern with the Family Reunion Program (FRP), reporting that staff members were restricting their access to the program. We learned during our January 2011 call that in response to inmate complaints, the Sing Sing administration compiled a report illustrating that FRP visits have increased annually over the past several years. According to this report, the facility conducted 518 FRP visits in 2007, 549 in 2008, 558 in 2009, and 552 in 2010. Facility administrators also stated that they are doing their best to accommodate the very high demand for FRP visits, explaining that inmates are permitted three FRP visits a year and that visit applications are processed approximately 45 days after the most recent visit. We commend facility administrators for their efforts in making the FRP accessible to inmates and hope that the program will continue to expand with increased need.

Mail/Packages

The package room is open Monday through Friday. Inmates with whom we spoke frequently complained about the package services at Sing Sing, noting that there were often very long delays in receiving mail and packages and that items were frequently missing. Only 21% of surveyed inmates reported satisfaction with mail and package services at Sing Sing, which is considerably worse than the average rate of 34% at other CA-visited prisons. In 2008, inmates filed a total of 187 grievances concerning the package room, an 85% increase over the 101 grievances filed in 2007. According to the facility's Year-End Report for the Inmate Grievance Program for 2008, this increase was due specifically to a greater number of grievances concerning missing items, delays in processing of packages, items being denied, postage being overcharged when returning items, daily package lists not appropriately posted, and package room procedural questions. Staff suggested that placing a camera in the package room might improve package services.

We were pleased to learn during our January 2011 conversation that facility administrators had implemented an evening package run to remedy the delivery delays. According to staff, all packages received during the day are distributed in the evening of the same day. We look forward to learning if this improved system increases inmate satisfaction with package distribution.

Mess Hall

Sing Sing serves approximately 5,000 meals per day in its three mess halls, including 150 inmates on special medical diets and 28 inmates on Kosher diets. Vegetarian options are available, and the mess hall is opened nightly during the month of Ramadan to accommodate the approximately 250 inmates who fast. Staff estimated that on average, it takes inmates 15 minutes to eat and about two and a half hours to feed all inmates at each mealtime. There was a decrease in mess hall grievances from 2007 to 2008, which staff credited to better accountability and attention to detail by the Food Services Administrator. According to inmates with whom we spoke, there were no serious problems with food at Sing Sing, although many complained that there were not enough fresh fruits and vegetables. Sixty-seven percent of inmates who took our survey reported dissatisfaction with the food, similar to the average dissatisfaction rate of 69% reported by all inmate survey participants from the CA-visited facilities.

Medical Care

At the time of our visit to Sing Sing, authorized medical staff included the following positions: four full-time physicians; three physician's assistants (PA); one nurse practitioner (NP); 18 registered nurses; two pharmacists; and two pharmacist's aides. During our visit we learned that two physician positions were vacant, the Facility Health Services Director (FHSD) and one other physician position. The previous FHSD had left in December 2008 and the facility staff informed us that they were in the process of hiring a replacement who was waiting for clearance to start the job. The prison did not have authorization from DOCS' Central Office to hire a doctor to fill the remaining physician vacancy. The three full-time PA and one NP positions were full.

Of the 18 authorized permanent registered nurse (RN) positions, the prison employed only 14 RNs, and four staff items were vacant. Although the facility has authorization to fill these positions, they cannot find appropriate candidates because, according to the prison staff, the wages for nurses in DOCS is approximately \$10,000 less than the salaries offered in the community for nurses. In order to cover for these vacancies, the prison employs a full-time per diem nurse and a half-time extra service nurse. In addition, the medical staff informed us that they utilize approximately 30 overtime shifts per month. The staff said most overtime assignments were voluntary, but verified that some overtime was involuntary. The prison had not requested any additions to their medical staff, though had requested authorization to fill vacancies. The use of per diem and extra service nurses and extensive overtime to compensate for insufficient nursing staffing is undesirable and can lead to staff burn-out. If staff vacancies are to be eliminated, efforts must be made by state officials to raise the salary of nurses to compete with community-based health programs in the region.

During our January 2011 conversation, staff informed us that the FHSD was replaced in May 2009. We also learned that there remained one physician vacancy, however the facility had identified a potential candidate and an interview with this candidate was scheduled for the following week. There also were three nurse vacancies, but administrators informed us they were authorized to fill all positions and 12 candidate interviews were scheduled for the following week. Staff assured us that they do not experience problems hiring staff due to a pay differential,

and in fact had access to a greater candidate pool due to the recent economic downturn. We expect all positions to be filled by the publication of this report.

Sick Call

At the time of our visit, sick call was conducted four days per week (Monday, Tuesday, Thursday and Friday) usually between 6:00 a.m. and 8:30 a.m. Three nurses were assigned daily to sick call, and they saw inmate-patients in areas located in the general population housing blocks. Daily sick call was also conducted in the Special Housing Unit (SHU) by a PA or NP. The staff estimated that approximately 40 inmates are seen every day at sick call, but noted sick call attendance could be as high as 70 inmates in a day. CA survey participants were particularly critical of the access to sick call, with 53% of survey participants reporting that they cannot access sick call at least sometimes when they need care. This rate places the prison in the lower quarter of the 26 facilities we have surveyed on this matter. The survey participants were somewhat more positive about the quality of the sick call nurses; 16% of respondents said they were good, 43% rated them as fair and 42% said they were poor. These figures are about average for the CA-visited prisons.

During our January 2011 conversation, we learned that in November 2009 staff implemented a new sick call process, which now requires all general population inmates signed up for sick call to come to the hospital area at 6:30 a.m. We look forward to learning of the efficacy of this new process.

Clinic Call-Outs

Inmates requiring more care than that which is provided at sick call can be referred to the doctors, PAs or NP for examination in the medical clinic area. The medical staff reported that clinic call-outs are held both in the morning and afternoon, and approximately 300 patients are seen on average each month. The survey respondents estimated that it takes approximately 14 days to see a clinic provider, a delay that places Sing Sing in the middle of all CA-visited facilities. Thirty-seven percent of the survey participants said they frequently experienced delays seeing their clinic provider, and 17% reported never being delayed, rates that fall in the lower half of prisons for which we have obtained data. The inmates had mixed views of the quality of the services given by the clinic providers. Ten percent of respondents rated the providers as good, 44% said they were fair and 46% reported them as poor. These rates place Sing Sing in the middle of the 26 prisons surveyed by the CA. In analyzing survey participants' responses, the most frequently stated concern was delayed access. Although some inmate-patients complimented the clinic providers for the care they received, other survey respondents stated that some providers were disrespectful, uncaring or inattentive to their medical complaints.

Chronic Care

Sing Sing has a significant number of inmates who suffer from chronic medical problems. At the time of our visit, the prison had identified 224 inmates with asthma, of which 128 were on treatment; 167 inmates with hypertension, of which 72 were on treatment; and 85 inmates with diabetes, of which 53 were receiving daily medication. Medical staff informed us

that patients with HIV and hepatitis C (HCV) were equally divided among the doctors and alphabetically assigned to a consistent provider by inmate last name.

The facility reported that 161 inmates were identified with HCV, representing 9.3% of the inmate population. Although the CA estimates that approximately 12.8% of the DOCS population is HCV-infected, the Department had identified only 9.0% of its entire prison population as HCV-infected as of 2007.¹ One hundred and eighteen of the identified HCV-infected Sing Sing inmates were chronically infected with HCV, a rate comparable to that which exists in the community. The prison reported that 13 HCV-infected inmates were receiving HCV therapy, a rate for treatment (8.1%) that was substantially higher than the Department-wide treatment rate of 5.3% we found in 2007. In addition, medical staff reported that the facility has initiated HCV therapy for individuals who were released prior to completing the one-year treatment regimen and arranged for community continuity of care. The staff reported that most HCV-infected inmates who are treated generally respond well to the therapy, but that there are racial differences in the effectiveness of the treatment, with African-American inmates doing more poorly, as documented with patients in the community. The staff also reported that inmates co-infected with HIV and HCV have been successfully treated, although they tend to experience more side effects than those patients who only have HCV. We commend the facility for its apparent aggressive approach to HCV treatment and its inclusion of soon-to-be-released inmates in the therapy.

The facility reported that 36 inmates at Sing Sing were infected with HIV, 24 of whom were receiving treatment at the time of our visit. The prison's HIV-infection rate of 2.1% is significantly below the Department-wide average of 2.5% of the prison population identified as HIV-infected, and well below the estimated 6% of the population living with the disease. We believe greater efforts should be made to encourage Sing Sing inmates to be tested and to reveal to the Department that they are infected. For those inmates who are known to be HIV-infected, it appears that they have frequent appointments with an infectious disease (IFD) specialist. We commend Sing Sing providers for referring their HIV-infected patients to an IFD specialist at rates substantially higher than most other prisons. Staff reported that they have no recent deaths of inmates infected with HIV.

Specialty Care

Sing Sing utilizes specialty care services at rates greater than the Department-wide averages for most prisons.² Inmates reported problems with access to this care. Sixty-eight percent of survey respondents reported experiencing delays in access to specialty care at least sometimes, a rate that places the prison in the lower half of CA-visited prisons. These survey participants estimated the delay to be more than two months (69 days), a delay that places the prison in the lower third of surveyed prisons. Sixty-four percent of survey respondents reported that there was inadequate follow-up to the specialists' recommendations, a response placing Sing Sing in the lower half of the CA-visited prisons.

¹ Correctional Association, *Healthcare in New York Prisons, 2004-2007* at 46-47 and Exhibit E (2009).

² *Id.* at Exhibit J, p. 7.

Pharmacy and Medications

Two pharmacists and two pharmacist aides staff the prison's pharmacy. At the time of our visit, the pharmacy had recently received the new computer system for recording medication records. Sixty-two percent of survey participants who were on medications reported experiencing problems, at least some of the time, with obtaining their medications. This data places the prison in the lower third of facilities visited by the CA. The most frequent complaints we received from survey participants about medication were ineffective medications, refusal of the prison medical staff to prescribe medications that the patient received in the past to treat his condition, and delays in refills and renewals of medications for chronic conditions.

Quality Improvement Program

The prison staff reported they conduct quarterly quality improvement (QI) meetings. Members of the committee generally include the Facility Health Services Director, nurse administrator, Deputy Superintendent for Administration and the area sergeant, but other staff attend based upon the issues being discussed. The staff informed us that the facility QI does not generally involve the review of medical records of inmates suffering from chronic conditions. We reviewed minutes of the February and March 2009 meetings about specific issues surrounding an inmate's death and an error during a routine tuberculosis screening test for staff. These documents do not reflect a consistent agenda for follow-up from prior meetings. It would appear that greater organization and documentation of the facility QI meetings would enhance the prison's efforts to identify potential medical care issues.

Dental Care

The prison is allocated four dentists, but at the time of our visit, it employed only three dentists. The facility also employs one dental hygienist. The staff informed us that the prison had identified a potential candidate to fill the dentist vacancy but the facility had not yet received approval from the Department to hire this individual. The dental staff told us that routine dental appointments take two to three weeks to occur and that there is a three week wait for a dental cleaning by the hygienist. Inmate survey participants reported significantly greater delays; the median delay to see a dentist estimated by the survey respondents was 60 days. This figure is the median delay recorded at the 11 prisons for which we have comparable data. The respondents also had mixed reviews of the dental care they received; 24% of survey participants rated the care as good, 35% said it was fair and 41% assessed it as poor. This rating places Sing Sing in the middle of the CA-surveyed prisons concerning dental care.

During our January 2011 conversation with staff we learned that all dentist positions had been filled in November 2009, however one dentist left Sing Sing in November 2010 and the facility did not yet have authorization to fill the position.

Mental Health Care

Sing Sing is an Office of Mental Health (OMH) level one facility, requiring that mental health personnel be present in the prison at all times and signifying that it is capable of treating inmates with the greatest need for mental health services. While other prison programs and

security are the responsibility of DOCS staff, prison mental health services are provided by OMH staff. According to information provided by the facility, there were 494 Sing Sing inmates on the mental health caseload as of April 2009, comprising about 29% of the prison's inmate population. This number included seven inmates who were in the Special Housing Unit (SHU), 62 in the Intermediate Care Program (ICP), 16 in the Residential Crisis Treatment Program (RCTP), 18 in the Transitional Intermediate Care Program (TRICP). At the time of our visit, Sing Sing housed 300 patients with an "S" OMH classified mental illness, signifying that they meet the definition of an inmate with serious mental illness as provided in the settlement agreement resulting from the Disability Advocates Inc. (DAI) litigation.³ Of the "S" designated inmate-patients, two were in the SHU, three were under keeplock, and 134 were in the general population.

At the time of our visit, OMH staff stated there were 29 mental health staff members at Sing Sing and no vacancies. They said the prison mental health staff included: seven social workers, six nurses, five psychologists, four clerical positions, three psychiatrists, one recreational therapist, and the unit chief. Staff told us that the size of the staff had increased over the last few years due to the opening of new programs. Mental health staff reported that they meet with general population inmates who are on the OMH caseload once a month, spending 10 minutes with patients with Axis II disorders, and 30 minutes with patients with Axis I disorders. These inmates may also be on psychotropic medications, which are distributed only by OMH staff and not by DOCS medical nurses. Group therapy is not available to general population inmates.

OMH staff informed us that if an inmate is mentally ill but does not want to participate in any mental health programs, he will be placed in general population and seen there by OMH staff. They further reported that most inmates who refuse assignment to the ICP are successful in general population, however, some inmates' disruptive behavior in general population result in their admission to CNYPC, BHU, or RCTP.

The mental health housing units are located on blocks B and D of the prison. Both inmates and OMH staff described high levels of tension between mentally ill inmates and security staff. Inmates reported frequent violence in B-block, stating that COs often verbally harass inmates with mental health illness. Staff reported that only COs working in the ICP receive special training on how to care for and work with inmates with mental illness. However, OMH staff mentioned that although OMH does not generally conduct such trainings in general population units, it will do so upon request by the facility administration. The inability of mentally ill inmates to respond appropriately to direct orders may cause frustration and misunderstanding among COs who are not adequately trained to work with these inmates; for example, inadequately trained COs may misinterpret inmate behavior and respond inappropriately. Given the prevalence of inmates with mental illness throughout the prison, all Sing Sing staff should receive training in how to recognize inmates experiencing symptoms of mental illness and how to work more effectively with them. Facility administrators assert that all staff receive some level of instruction during general officer training regarding how to work with

³ Disability Advocates, Inc. v. NYS Office of Mental Health, 02 Civ. 4002 (SDNY), was resolved by a Private Settlement Agreement in April 2007 and requires DOCS and OMH to provide a heightened level of care for all state inmates with serious mental illness in disciplinary confinement and includes provisions for additional treatment modalities and benefits for persons with mental illness in state prison facilities.

this special population, however, they acknowledge that this training may not rise to the level that we believe necessary.

Some inmates at Sing Sing described a tension between inmates with mental illness and those without, a situation we have identified at other state prisons. DOCS and OMH staff do not typically educate general population inmates about mental illness or about how to cohabitate with those suffering from symptoms. We were pleased to learn, however, that IPAs have had some success in teaching positive communication and conflict resolution skills to inmates to somewhat reduce this tension at the facility. We urge prison staff to expand efforts to provide more information about mental illness to inmates to help reduce some of the existing stigma, fears and tension between these two populations.

Of the inmates who responded to our survey, 46% reported that they had received or been recommended for mental health services and 63% reported that they had been on the OMH caseload while at Sing Sing. Sixty-four percent reported having seen someone on the mental health staff at least once in a while during the past year. Of the inmates who had been on the OMH caseload at the facility, 32% rated the mental health services as good, 43% as fair, and 25% as poor. These ratings are significantly better than the 22 other facilities we have visited, with rates of 22%, 41%, and 37%, respectively, and place Sing Sing in the top third of prisons we have visited in terms of mental health service satisfaction. Additionally, 15% of inmates reported having trouble receiving their mental health medications at least sometimes, a rate somewhat more satisfactory than many other prisons we have visited.

Intermediate Care Program (ICP)

The Intermediate Care Program (ICP) is a residential treatment program for inmates with mental illness designed to provide in-depth treatment of inmate-patients with Axis I or Axis II disorders. The ICP at Sing Sing has the capacity to accommodate 64 inmates and held 62 inmates at the time of our visit, a typical census according to staff. In 2005, this capacity was cut in half to make room for the Community Orientation and Reentry Program (CORP), but in 2007, CORP was relocated and the ICP regained the 30 beds it had previously lost. Staff estimated that the average stay in ICP is 18 to 22 months, although there are a small number of individuals (staff estimated nine or ten men) who had been in the ICP for three or four years, and some who had spent only three to six months there.

According to OMH staff, screenings for admission to Sing Sing's ICP are conducted by a collaborative team comprising OMH, DOCS, and Division of Parole staff. This screening team meets monthly to review referrals from COs and clinicians concerning inmates in the RCTP and in other facilities to determine ICP eligibility. According to mental health staff, a small but steady population of five to six ICP inmates comes from the Behavioral Health Unit (BHU) or SHU. At the time of our visit, there were four people on the waiting list; however, staff informed us that this list fluctuates greatly and that there were recently 16 inmates on the waiting list.

The 20-hour weekly group programming, most of which relates to mental health, includes topics such as Mentally Ill/Chemically Addicted (MICA), 12-step, Anger Management, Symptom Management, Activities of Daily Living, Self-Care, Symptoms of Mental Illness, and Medication Compliance. Recreational activities in the program include shuffle board and

gardening. The treatment team meets once each week to discuss all of the inmates in the program, and staff told us that over the past year they have incorporated informational reports and incentives into their treatment strategy. While in the ICP, inmates may participate in academic, vocational and job programs with the general population. Mental health staff estimated that at least 60% of the ICP program is completed in the general population, even among patients with chronic issues. According to the staff, integration is the primary goal of the program.

Staff members informed us that inmates may be released to the TRICP after completing the ICP, but more often are released into the general population. Movement from the ICP to the SHU is not frequent but does occasionally occur as staff considers the program one which emphasizes consequences as part of treatment. If such a case occurs, mental health staff recommend whether SHU placement is appropriate for the inmate. Staff reported that following the DAI settlement, the facility significantly reduced SHU sentences for seriously mentally ill inmates. Furthermore, OMH staff told us that the circumstances of an individual case drives the decision of whether or not to put an inmate in SHU; for example, if a psychotic break caused or contributed to the incident, staff would attempt to prevent a SHU sentence.

We received surveys from 15 inmates in the ICP. Survey respondents reported being incarcerated for a median length of five years, and had also been in the Sing Sing ICP for a median of five years. Overall, inmates rated the ICP positively, with 69% of inmates describing ICP services as good. Most of the inmates surveyed had positive comments about the program, especially noting that placement in the ICP removed the stress associated with living in the general population, and that the curriculum helped them better understand their mental health issues. Eighty-two percent of inmates we surveyed were satisfied with their access to the law library. All surveyed inmates were satisfied with recreation at least sometimes, half were satisfied with the educational program while in the ICP, and 43% were satisfied with the vocational program. Half of surveyed inmates reported going to group therapy about five times per week. Inmates reported that there are 10 to 15 inmates in each session, and each session lasts one to two hours. Most surveyed ICP inmates had also received individual therapy since being in the ICP, with an average meeting with their therapist of once per month. Inmates reported that these individual sessions lasted between 10 and 45 minutes.

Thirty-nine percent of surveyed ICP inmates characterized the relationship with staff as at least somewhat good. Eighty-five percent had never been in a physical confrontation with staff while in the ICP, although 36% reported frequently hearing of physical confrontations taking place in the ICP. Thirty-six percent reported having experienced verbal harassment from staff at least once in a while. Ninety-one percent believed there were COs who did a good job, while 55% thought some COs engaged in serious misconduct. Although 36% of respondents said that they frequently felt unsafe, all reported feeling safer in the ICP than in general population. In general, survey respondents were dissatisfied with the grievance system in the ICP, with only 30% rating it as even somewhat effective, and 11% reporting that they were frequently retaliated against for filing a grievance. Ninety-three percent of survey respondents had received tickets since being incarcerated and half of the survey respondents had received tickets while in the Sing Sing ICP. Approximately half of the inmates who took the survey had been in the SHU, and one respondent had received a deprivation order.

Incidents of suicide and self-harm are more prevalent among inmates diagnosed with mental illness than among inmates who are not on the mental health caseload. In 2007, DOCS reported that of the 18 New York state inmates who committed suicide, half were designated as OMH level one, two, or three. At Sing Sing, 50% of the 14 ICP inmates who took our survey and responded to the questions concerning self-harm had attempted to harm themselves since their incarceration, and three had attempted to harm themselves while in the Sing Sing ICP. Thirty, 42, and 14 inmates transferred from the ICP to the RCTP in 2007, 2008, and 2009 (through the first quarter), respectively.

Overall, we found the ICP to be a relatively safe and stable environment. The ICP survey responses reveal, however, that the amount of individual therapy is limited. We are concerned about the prevalence of acts of self harm among inmates with serious mental health needs, both prior to their placement in ICP and once they are on the unit, and therefore, we urge DOCS and OMH staff to investigate ways to reduce these incidents.

Transitional Intermediate Care Program (TRICP)

According to OMH and DOCS, the Transitional Intermediate Care Program (TRICP) provides heightened mental health services and program hours to inmates with mental illness who do not require such intensive services as those provided in the ICP. Sing Sing's TRICP opened in March 2008 and at the time of our visit, contained 16 inmates. TRICP inmates attend regular prison programming but also receive individual therapy and group counseling sessions. The TRICP is oriented towards helping inmates participate in programs with general population inmates. TRICP inmates also attend two TRICP groups per week, with nine patients in each group. OMH staff reported that the program can last six months to a year; however, program length depends on each individual case.

In 2008, 38 inmates were admitted to the TRICP and 16 were discharged, with an average length of stay of 55 days.⁴ During that year, five inmates transferred from the TRICP to the ICP, two to the SHU, and two were discharged to general population. In 2009, 20 inmates were admitted to the TRICP and 20 were discharged.⁵ According to OMH's Annual Reports for each year, nearly all TRICP inmates participated in the two group sessions per week.

Community Orientation and Reentry Program (CORP)

Sing Sing is the site of one of two Community Orientation and Reentry Programs (CORP) in New York, the other being at Bedford Hills Correctional Facility for women. CORP is a 90-day treatment and discharge planning program for seriously mentally ill inmates who are nearing their release date. The Sing Sing CORP is five years old and has a capacity for 30 inmates. About 120 inmates (out of the approximately 2,000 with mental illness discharged from DOCS facilities each year) pass through this program annually. OMH staff explained that in order to enter the program, inmates must have an OMH classification level one or two, a fixed release date, and a plan to be released to the New York City area. Staff reported that 80% to 90% of the inmates in CORP have an "S" designation.

⁴ OMH, *Transitional Intermediate Care Program: Annual Report 2009* at 8 (April 2009).

⁵ OMH, *Transitional Intermediate Care Program: Annual Report 2010* at 8 (March 2010).

Staff explained that the CORP curriculum follows a psychological rehabilitation plan aimed at ensuring that inmates will be able to take care of themselves and acquire the skills they will need to function well after their release. Symptom and medical management topics are covered in a group setting and inmates become familiar with life outside of prison by learning about topics ranging from public transportation to coping with frustration. In order to facilitate access to services in the community, prison staff informed us that approximately 85% of CORP inmates receive their Social Security card at their first appearance in the community Social Security office. In addition, they told us that the general recidivism rate for former inmates with serious mental illness is 52% compared to only 38% for former inmates who have passed through CORP. Upon an inmate's release, a staff person meets him at the Metro-North train station for assistance.

Residential Crisis Treatment Program (RCTP)

The Residential Crisis Treatment Program (RCTP) provides temporary segregation for inmates experiencing mental health crises and who pose a danger to themselves or others, or who exhibit signs of serious psychological issues requiring attention. At the time of our visit, there were 16 inmates in Sing Sing's RCTP, which had a total capacity of 22. Staff informed us that inmates spend an average of four days in observation cells before graduating to the RCTP dorm. Inmates in the RCTP dorm receive mental health treatment services from OMH staff. Sing Sing's RCTP dorm also houses general population inmates. According to information provided by the facility, 432 inmates were admitted into the RCTP in 2007, 454 in 2008, and 112 in 2009 as of March 31, 2009. We learned during our January 2011 conversation with staff that the RCTP dorm capacity was decreased by four beds.

One hundred forty-two, 145, and 42 inmates transferred from the general population to the RCTP in 2007, 2008, and 2009 (through the first quarter), respectively. Many of these inmates were discharged from the RCTP back into the general population. In 2007, 2008, and the first quarter of 2009, 117, 117, and 29 inmates, respectively, were transferred from the RCTP to general population. Inmates exhibiting severe psychiatric problems are sent to the Central New York Psychiatric Center (CNYPC) for assessment. According to staff, the determination of whether to send an inmate is often made after three days in the RCTP. Fifty-four, 36, and eight inmates were sent from the RCTP to CNYPC in 2007, 2008, and the first quarter of 2009, respectively. Inmates are also discharged from the RCTP to the ICP and to the SHU. Fifty-eight, 47, and 22 inmates were transferred from RCTP to the ICP in 2007, 2008, and the first quarter of 2009, respectively. Thirty, 21, and eight inmates were discharged from the RCTP to the SHU in the same time period. Considering that most inmates in the RCTP have recently experienced severe psychological distress, we are concerned about the high number of inmates sent from the RCTP to 23-hour solitary confinement in the SHU.

Safety

Staff-Inmate

Sing Sing inmates expressed mixed views of the staff, with a majority of survey respondents presenting somewhat negative assessments of the staff. Overall, the levels of

concern reported in survey responses were similar to the average rates we obtained from survey respondents at other prisons we visited; for many questions, Sing Sing rates ranked in the middle of the CA-visited prisons. When we asked inmates about relations with staff overall, 65% rated relations with staff as bad, slightly worse than the average rate of 62% at the other prisons we have visited. Sixty-two percent of survey participants said that relations with staff were much or somewhat worse at Sing Sing than at other prisons where they had been incarcerated, while 27% said they were the same and 11% said they were somewhat or much better, figures that are comparable to the average responses for all CA-visited prisons. Eight-two percent of survey respondents said that there were COs who engaged in serious misconduct and 91% said there were COs who did a good job. When asked what percentage of COs were bad, the survey participants median estimate was 50%; participants' median estimation of the percentage of COs who did a good job was 30%, rates nearly identical to the average rates for all CA-visited prisons. Forty-six percent of respondents said they frequently felt unsafe. When we asked inmates how unsafe they felt, 40% of respondents said they felt very unsafe and 37% said they felt somewhat unsafe, again, average rates for all CA-visited prisons. Eighty-five percent of survey participants said that they believed the prison's administration does nothing or very little to prevent abuse.

Of the inmates who responded to our survey, 27% reported having been in a physical confrontation with an officer at Sing Sing at least once, corresponding to the average rate at other CA-visited prisons (26%). Also very similar to the rate (54%) we found at other prisons, 56% of Sing Sing survey respondents said that verbal harassment from COs occurred very frequently throughout the prison. Fifty-five percent of respondents believed verbal harassment to be the most common form of officer abuse.

Inmates reported that B-block and the mess hall bridge were particularly violent areas and that the housing areas for mentally ill inmate-patients had the highest rates of staff misconduct. In our conversations and correspondence with inmates, complaints about behavior of COs towards visitors, general physical abuse, and harassment were cited as major concerns, with many noting that there were specific COs who are more problematic than others.

According to responses we received from our survey, 12% of inmates reported that sexual abuse occurs frequently and an additional 27% believe that it occurs once in a while. These numbers are higher than at other prisons we have visited, where the averages were 9% reporting that it occurs frequently and 20% reporting that it occurs once in a while. Sing Sing ranked in the top 20% of all CA-visited prisons concerning reports of frequent staff sexual abuse. Given respondents' less negative assessment of other staff misconduct, we are particularly concerned about this issue, and urge the prison to more closely monitor allegations of sexual abuse and to meet with members of the ILC and IGRC to explore how to reduce sexual abuse and how to promptly identify and respond to staff sexual misconduct when it does occur. Twenty-four percent of surveyed inmates reported that they frequently experienced abusive pat frisks, similar to the average at other CA-visited prisons (23%).

A few staff who had been working at Sing Sing for a long period of time noted an increase in the African-American and Hispanic inmate population and an increased number of patients with mental health issues. Some security staff noted that there were more people of color working at Sing Sing than at other facilities, thereby reducing racial tension, but also creating

opportunities for potential conflict due to closer contact and communication between this staff and the inmate population. Overall, we found the racial diversity of the staff to be a positive factor. Although 32% of Sing Sing surveyed inmates believed racial tension to be at least fairly common, this figure is significantly lower than the average of 51% at other CA-visited prisons.

We reviewed DOCS computer records concerning Unusual Incident Reports (UIRs) at Sing Sing for the period 2003 through 2009 and disciplinary data for the periods January 2003 through August 2006 and for calendar year 2008, and we compared this data to system-wide records for all state prisons. The rate at which Sing Sing issued misbehavior reports for assault-on-staff is near the lower third of all maximum security prisons in the state for the entire period 2003 through August 2006 and for all of 2008. The UIR rate for assault-on-staff during the entire 2003 through 2009 period placed the prison in the middle of all maximum security prisons. The rate remained similar during 2007 through 2009, again placing Sing Sing's UIR rate in the middle of all maximum security prisons. During our January 2011 conversation, administrative staff explained that they make every effort to respond to inmate allegations of officer mistreatment and that they do conduct diversity trainings for staff.

Inmate-Inmate Relations

Surveyed inmates expressed concern about the number and severity of physical confrontations between inmates, reporting that an inmate lost an eye in one such conflict in 2008. Staff reported that the administration has taken a more active role in preventing inmate-on-inmate conflicts since this incident, and inmate fights have become less frequent.

Most survey participants (75%) said they had never been in a physical confrontation with another inmate at Sing Sing, and 95% said inmate fights occurred only once in a while throughout the facility, with 13% saying they never happened. These numbers are somewhat higher than at most other prisons we have visited, including at other maximum security prisons. Forty-four percent of survey respondents said that in terms of fighting among inmates, Sing Sing was the same as other facilities where they had been incarcerated, and 25% said Sing Sing was somewhat better. Thirty-eight percent of survey respondents said that staff were involved in inmate fights once in a while, significantly higher than the average rate of 28% at other CA-visited prisons.

Nearly all survey respondents (89%) reported that gang activity is very or somewhat common, one of the highest rates of gang activity of all CA-visited facilities. All respondents reported that there was at least some level of gang activity. Eighty-two percent reported that gangs were a source of violence at the prison, significantly higher than the 60% average rate at other CA-visited prisons. Security staff agreed that gang activity was common at Sing Sing, especially among younger inmates.

More than half of the inmates (58%) said that contraband drugs were common in the facility, which is significantly higher than the average rate of 35% at other CA-visited prisons. Sing Sing survey respondents had the highest percentage (36%) of inmates reporting contraband drug use as very common at their prison. Staff reported that in 2008 they issued 179 misbehavior reports for drug use or possession to 158 different inmates. In comparison to other prisons where they had been incarcerated, 42% of surveyed inmates said that drugs were much or somewhat

more common at Sing Sing. This number is approximately twice the average rate of 20% for all survey participants at the CA-visited prisons. Similarly, 57% said that drugs were at least somewhat a source of violence at Sing Sing, compared to the average of 37% for all CA-visited prisons.

We also reviewed DOCS computer data concerning Unusual Incident Reports (UIRs) at Sing Sing for the period 2003 through 2009 and disciplinary data for the periods January 2003 through August 2006 and 2008, and we compared this data to system-wide records for all state prisons. This data places Sing Sing in the top third for the rate of assault-on-inmate UIRs for all maximum security prisons for this seven-year interval; the top third rating also applies when just analyzing the 2007-2009 UIR data. The prison's rate for assault-on-inmate misbehavior reports, however, is in the lower half of all maximum security facilities. The rate at which Sing Sing issues disciplinary reports for fighting was also in the lower half of all maximum security facilities. Although the UIR and disciplinary data are not consistent, it appears that Sing Sing is experiencing more serious inmate-on-inmate assaults, prompting the issuance of a higher rate of UIRs, but the prison is not experiencing a comparable rate of less serious inmate-on-inmate confrontations as reflected in its lower disciplinary report figures for the same time period.

Grievance Program

According to information provided by the facility, inmates filed a total of 1,562 grievances in 2008, 9% less than the 1,725 filed in 2007. In 2007, the grievance rate at Sing Sing was 11th among the maximum security prisons in the state. Grievances most frequently concerned medical care and packages, with these two categories comprising 27% of all grievances filed at the facility. A total of 241 grievances were filed concerning medical care in 2008, 15% of the total. At the time of our visit in March 2009, 22 medical care grievances were already filed. Medical care has been the most frequently grieved area at Sing Sing since 2006.

To submit a grievance, inmates can obtain grievance forms in each housing area and must deposit the form in a box located in the mess hall, where they are collected daily by staff. For inmates in the SHU, a CO collects and drops off grievance forms on a daily basis. An orientation to the grievance program is conducted for new inmates every Wednesday.

In addition to a Grievance Supervisor, the facility employs 12 inmates to assist with the grievance process. Inmate staff include four clerks from the Inmate Grievance Resolution Committee (IGRC) office, each serving a six-month term, four administrative clerks, and four general clerks, all trained by the Grievance Supervisor. IGRC representatives may obtain passes to go anywhere in the facility to investigate a grievance, however, they are not permitted to investigate grievances concerning staff or the medical care services.

Staff informed us that they believe inmates often grieve issues that they could resolve on their own or with a Counselor. We learned from inmates and from the DOCS Year-End Report for the Inmate Grievance Program that few complaints were informally resolved, for example only seven were informally resolved in 2008.

Of the inmates who responded to our survey, 58% reported having used the grievance system at Sing Sing. Forty-six percent of those inmates rated the system at Sing Sing to be at

least somewhat worse than at other correctional facilities, 48% stated that it was the same, and only 7% rated it as somewhat better. Inmates told us that they often refrained from filing grievances, especially in the area of staff misconduct, because they feared retaliation. Despite these comments, the rate survey participants who said they experienced staff retaliation (52%) was less than the average rate of 65% at other CA-visited prisons. Of the inmates who reported having used the grievance system at Sing Sing, only 26% believed that it was at least somewhat effective, a rate similar to other CA-visited prisons.

Special Housing Unit (SHU)

Sing Sing's Special Housing Unit (SHU) has the capacity to confine 30 inmates and at the time of our visit, held 24 inmates. In 2007, 2008, and as of April, 2009, 467, 356, and 69 inmates, respectively, had been admitted to the SHU. We received surveys from five inmates in the SHU, who had spent a median time of three weeks in the unit.

None of the survey respondents were enrolled in the cell study program, and one inmate indicated that he had never been told about the program. All of the inmates who responded to our survey were satisfied with their access to reading materials at least some of the time, and nearly all were satisfied at least sometimes with their access to the law library and legal materials. Most of the survey respondents were satisfied with their access to mail, however, most reported dissatisfaction with the food in the SHU, complaining that it tends to be the same every other week. Most survey respondents reported that they go to recreation at least once in a while. None of the inmates who responded to our survey reported receiving a deprivation order while in the SHU, and the prison reported that no deprivation orders had been issued for inmates in the SHU at the time of our visit.

The majority of the survey respondents reported that a nurse, doctor, PA, or NP does rounds in the SHU five to seven times each week, and all respondents said they could access sick call when necessary at least some of the time. Most survey respondents rated sick call nurses and doctors, PAs and NPs in the SHU as fair. Respondents rated dental care in the SHU as poor, most explaining that they had been unable to see a dentist, despite having persistent dental problems. Of the inmates who responded to our survey, only one was on the OMH caseload.

Survey respondents had a mixed view of inmate-officer relations in the SHU, with one saying it was very good, two rating relations as somewhat good, and two reporting it as very bad. Most survey respondents reported never having been in a physical confrontation with a SHU staff member and most reported never feeling unsafe, although those who reported feeling frequently unsafe also reported feeling very unsafe, with one respondent saying that he was scared to report his problems. Most survey respondents rated the grievance system as at least somewhat effective and most reported never experiencing retaliation for filing a complaint.

Meeting with Staff

At the time of our visit, Sing Sing employed 645 Correction Officers and had no security staff vacancies. We met with representatives from the NYSCOPBA, PEF, and Council 82 unions. The staff believed that there was an insufficient number of programs available to inmates at the facility, leading to an excess of idle time and increased violence among inmates.

Experienced staff reported that there had been an increase in patients with mental health issues, and this change in the population had not been accompanied by adequate training in how to work with inmates who are mentally ill. Staff informed us that the mental health training that exists tends to be redundant, and new information at each training session would be more beneficial. Staff were also concerned with the effect that budget cuts might have on security staff at the facility.

Recommendations

We recommend that state policy makers work with DOCS Central Office administrators and facility officials to implement the following measures:

Programs

- Fill staff vacancies in the academic and vocational programs.
- Reduce the number of inmates assigned to porter positions and provide more meaningful prison job opportunities that will permit inmates to develop skills and experiences that enhance their ability to find employment upon release.
- Increase the capacity of the educational and vocational programs and thereby reduce the waiting period inmates experience before being assigned a program.
- Increase Spanish-language materials in academic and vocational programs and attempt to recruit bilingual instructors.
- Continue to expand the postsecondary education opportunities for inmates who have earned their GED or high school diploma.
- Expand the number of vocational programs, reestablish the general business class and replace outdated equipment in the vocational shops.
- Increase opportunities for inmates to receive a DOL or NCCER certificate.
- Increase the rate of pay for inmates at all DOCS facilities to reflect increases in the cost of items in the commissary.
- Raise the limit on the amount inmates can spend at the commissary.
- Expand the general library's collections and improve inmates' access to the library.
- Review the processing and treatment of visitors to ensure timely access to the inmate population and courteous and professional treatment by the visiting staff.
- Review the processing of requests for the Family Reunion Program to ensure that all those eligible are promptly approved and scheduled in a timely manner.

- Continue to take measures to prevent delays in the delivery of mail and packages to inmates and to reduce destruction or loss of items contained in packages.

Medical Care

- Promptly fill all medical staff vacancies; if the empty positions cannot be filled expeditiously, increase the salary levels for unfilled medical staff positions to be competitive with community salaries for comparable positions.
- Continue to take measures to improve access to sick call and clinic call-outs for general population inmates.
- Make greater efforts to encourage inmates to be tested for HIV and to reveal their HIV status to the medical staff.
- Improve the timeliness of specialty care appointments and initiate a review of completed consultations to determine whether there has been adequate follow-up to the specialists' recommendations.
- Review complaints concerning access to medications and develop a corrective plan if systemic deficiencies are identified.
- Regularly conduct, as part of the facility quality improvement (QI) program, chart reviews of the medical records of a representative sample of inmates with chronic conditions or those who utilize specific medical services. Improve the documentation of the QI meetings and report the results of all chart reviews and follow-up activities.

Dental Care

- Promptly fill the vacant dentist position; if a replacement cannot be identified expeditiously, increase the salary level of the position so that it is competitive with community salaries.

Mental Health Care

- Expand training of security staff throughout the facility concerning how to recognize inmates who may be suffering from mental illness and how to work more effectively with them.
- Provide the inmate population with more information about mental illness to improve the interaction between the general inmate population and inmates with mental illness.
- Convene a meeting between OMH staff, the ILC and IGRC, and inmates on the OMH caseload to discuss the difficulties some inmates experience with their medications to determine what modifications, if any, could be made to reduce these problems.

- Review cases of inmates transferred from the RCTP to a SHU to assess whether any of these individuals should have been diverted from disciplinary housing to a residential mental health unit.

Safety

- Assess the level and causes for tension within the facility and develop a plan to reduce this tension and incidents of verbal harassment, including diversity training for staff and inmates.
- Review grievances, other documents, and pat-frisk procedures and practices at the prison to assess the prevalence of abusive conduct by staff toward inmates and to identify means to eliminate this behavior.
- Review Unusual Incident Reports, grievances, and misbehavior reports to assess whether there are patterns of violence in the prison, both among inmates and between inmates and staff, and whether certain areas within the prison are more common locations for violence. Following this review, develop a plan, including additional staff training, to reduce violence between inmates and staff and among inmates.
- More closely monitor allegations of sexual abuse by staff and/or inmates and meet with the ILC and IGRC to explore how to reduce sexual abuse and how to promptly identify and respond to staff sexual misconduct when it does occur.
- Develop and implement additional measures to reduce gang participation and drug usage in the prison through non-punitive methods.
- Meet with the ILC and IGRC to discuss ways to reduce tension at the prison and to improve the effectiveness and credibility among inmates of the grievance system.