



***CONNECTION WITH
THE OUTSIDE WORLD:***
**PRISON MONITORING FINDINGS
AND RECOMMENDATIONS**

Report for the Quarter July-September 2019

Correctional Association of New York
175 Years of Independent Oversight

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PREFACE

In early 2020, reports of more than a dozen deaths in Mississippi prisons and jails drew national attention to the consequences of over-incarceration and underinvestment in our prisons, as well as the danger of corrections systems that operate without oversight. If not for cellphone images of the squalor and overcrowding at Parchman, the crisis of prison conditions in Mississippi may have remained a local story.

The perilous living conditions and pervasive violence present in correctional facilities across the country would horrify most taxpayers. Correctional staff, incarcerated people, and their families know what happens inside our prisons, but because these facilities are closed systems, the broader public, including the media, is usually locked out – and in the dark.

New York differs from Mississippi and nearly every other state¹ because the Correctional Association of New York (CANY) provides independent, nongovernmental oversight of its prisons. Established in 1844, CANY is the only independent organization in New York authorized under state law to monitor prisons and report to the legislature and public. Since its inception, CANY has led community members on monitoring visits to prisons to shine a light on living conditions and advocate for more humane policies and practices. As a result of this crucially important access, CANY has been instrumental in shaping and securing nearly every major criminal justice reform in New York for close to two centuries.

New York's prisons differ from Mississippi's in other key ways. First, prisons in New York are not overcrowded; falling crime rates and evolving enforcement priorities

have led to historic drops in the New York state prison population, from 59,601 in June 2009 to 45,045 as of July 1, 2019². The declining population has given rise to 17 prison closures since 2011, and additional closures are slated for 2020, according to the Governor's proposed budget. Second, taxpayers in New York pay handsomely for the state's prison system. The proposed budget for the New York State Department of Corrections and Community Supervision (DOCCS) in FY 2021 is \$3.4 billion³, which includes capital improvement projects, healthcare, rehabilitative programs, and security personnel across the 52 facilities.

Incarceration at any scale – and its associated costs – warrant close scrutiny, especially as New York leads the nation on landmark decarceration strategies, such as limiting the use of cash bail and decommissioning the jails on Rikers Island in New York City. Independent oversight is as essential a function in times of opportunity as it is in times of crisis.

CANY's mission is to safeguard the human and civil rights of people in prison in New York; promote transparency and accountability in New York State prisons; produce evidence that portrays the unseen impact of incarceration; and support decarceration strategies. At CANY, we envision a future in which prisons hold far fewer people, for much less time, in transformed conditions that promote health, safety, and wellbeing for incarcerated individuals, communities, and society at large. In 2020 and future years, CANY will disseminate regular reports on its monitoring findings in further fulfillment of its mission. This and past reports can be found at www.correctionalassociation.org

1 The John Howard Association (Illinois) and the Pennsylvania Prison Society perform independent, nongovernmental oversight processes in those states.

2 According to DOCCS "under custody" data. This report covers July 1-September 30, 2019.

3 By comparison, the FY20 budget for the entire state of Mississippi was just over \$6.3 billion. See <https://www.msppolicy.org/state-budget-grows-by-al-most-4-percent/>

HISTORY AND SCOPE OF CANY'S ACCESS

LEGISLATIVE AUTHORITY AND BRIEF HISTORY

The organization known today as the Correctional Association of New York (CANY) was founded in 1844 by a group of 61 “concerned citizens.” They published a notice in local newspapers, calling on other New Yorkers to meet with them and discuss the employment needs of people leaving prisons and jails, as well as to address the “inhuman system of prison discipline.”⁴ On May 9, 1846, the Prison Association of New York (which changed its name to Correctional Association of New York in 1961) was incorporated by the New York State Legislature in an effort to provide independent oversight of jails and prisons, and keep the legislature informed of “their state and condition, and all such other things in regard to them as may enable the Legislature to perfect their government and discipline” (L.1846, Ch. 163, §6).

Forty-eight years after incorporating the Prison Association of New York, the legislature amended the New York State Constitution in 1894 to establish the State Commission of Prisons, which was empowered to inspect all penal institutions in New York. In 1926, the Commission’s name was changed to the Commission of Correction, and it was placed administratively in the newly created Department of Corrections. In 1973, in the wake of the Attica riot, then-Governor Nelson Rockefeller administratively moved the State Commission of Correction (SCOC) outside the ambit of the Department of Corrections and designated the Commission as an independent executive agency. He then argued that CANY’s role was no longer essential, perhaps reasoning that a governmental oversight entity would be sufficient.⁵ The legislature disagreed and reached a compromise that allowed the Correctional Association to continue its truly independent oversight role while curtailing its historical oversight powers.⁶

VISIT PROTOCOLS AND PROCEDURE

In 2005, a lawsuit brought against DOCCS by CANY was settled out of court.⁷ The settlement between the two agencies hinged on an agreement to a set of protocols that would guide how and when CANY accesses DOCCS facilities. Among other provisions, the protocols stipulate that no more than 12 CANY representatives may visit a general confinement facility at one time; that no more than two CANY representatives may visit a Special Housing Unit (SHU) and no more than four may visit Southport or Upstate Correctional Facilities; that representatives of DOCCS’ Counsel’s Office observe conversations between CANY and representatives of the Inmate Liaison Committee, the Inmate Grievance Review Committee, and DOCCS employee unions; that monitoring visits be arranged 30 days in advance; and that no information may be gathered for litigation purposes. Although the protocols were

4 Ilan K. Reich, *A Citizen Crusade for Prison Reform: The History of the Correctional Association of New York* (New York: Correctional Association of New York, 1994).

5 Today, the SCOC conducts limited oversight of state prisons, focusing mainly on oversight of county jails. The SCOC promulgates rules and standards for operating correctional facilities and periodically reviews compliance; additionally, the SCOC performs reviews of certain deaths that occur in correctional facilities across the state, including in DOCCS facilities.

6 L.1973, Ch. 398, §16. (Authorization to “inspect” and “examine” in the original legislation was repealed)

7 *The Correctional Association of New York v. Goord*, 04-CIV-02156, (S.D. N.Y. 2004).

created in part to add structure to the visit process, they inhibit CANY's ability to carry out meaningful oversight. Independent oversight of prisons is needed in a system that remains largely invisible to the public—a fact not lost on the legislature, which has introduced a correctional ombudsman bill multiple times throughout the years.⁸

These protocols limit CANY's capacity to provide the legislature and public with a truly comprehensive and candid picture of the conditions of detention and treatment. Further, they impose upon CANY a set of limitations that are below internationally recognized minimum standards for monitoring agencies, standards which stipulate the right of a monitoring body “to freely choose which prisons to visit, including by making unannounced visits at their own initiative, and which prisoners to interview,” and “to conduct private and fully confidential interviews with prisoners and prison staff.”⁹

Ultimately, the absence of a space to directly discuss key issues with staff members prevents the development of a collaborative dynamic, through which the value of objective independent oversight by CANY can be utilized by DOCCS and the legislature. With the aim of providing comprehensive and useful oversight of 52 prisons that incarcerate approximately 45,000 people, CANY is working with DOCCS and the legislature to improve the quality and scope of its access to both DOCCS facilities and information about them. Despite the existing limitations, CANY is committed to maintaining a constructive working relationship with DOCCS, as well as ensuring the safety and wellbeing of everyone who enters prisons in New York.

8 During the 2019-2020 session, a correctional ombudsman bill was proposed in New York: A2552/S3706. It would create an independent public oversight agency that would monitor prisons and investigate complaints. CANY does not have investigatory powers.

9 UN General Assembly, “Standard Minimum Rules for the Treatment of Prisoners and Related Recommendations” (Resolution A/RES/70/175, New York: United Nations, 1958), 25.

NOTES ON METHODOLOGY AND LIMITATIONS

The Correctional Association of New York (CANY) uses a variety of methods to collect data and conduct oversight of New York's state prisons. During this reporting period, approaches included in-person monitoring, surveying incarcerated populations by mail, and analyzing data obtained from DOCCS through Freedom of Information Law (FOIL) requests.

IN-PERSON MONITORING

During in-person monitoring visits, CANY representatives have largely unrestricted access to the facility, typically spending two consecutive days there. The CANY delegation is usually comprised of 12 representatives who meet with each facility's executive staff, representatives from the Inmate Liaison Committee and the Inmate Grievance Review Committee, medical staff, mental health staff, and academic and vocational staff. During these meetings, CANY staff and volunteers ask targeted questions and take notes to document the experiences and issues at each facility. Visual observation by CANY representatives, in addition to input from DOCCS staff, are used to corroborate reports made by incarcerated people, with the aim of ensuring that findings presented in CANY reports are sufficiently verified.

When not meeting in the groups described above, CANY representatives walk throughout each facility and speak with incarcerated people who are either inside cells or in their program areas. During interviews with incarcerated people, CANY representatives utilize an intake form for each person interviewed, which captures basic identifying information as well as issues any incarcerated person reports. Other individuals in attendance during the meetings and interviews include DOCCS Central Office staff, facility Executive Team staff, and security staff. At the conclusion of each monitoring visit, CANY representatives compile data, review notes made during the monitoring visit, and compare them to relevant historical data. The information is then synthesized to develop high level, preliminary findings about each facility. Using this information, CANY staff prepare a memo detailing these preliminary findings for the Commissioner of DOCCS and relevant staff, and then requests follow-up conference calls to discuss the findings and recommendations. CANY then sends a summary of that same memo, along with a post-visit follow-up survey, to each of the incarcerated people with whom CANY representatives spoke during the monitoring visit.

SURVEY METHODOLOGY

CANY distributed several surveys during this reporting period: one brief survey on preventative, routine medical care, and four post-visit surveys (one for each of the prisons monitored in the reporting period). In both cases, CANY sent incarcerated people the survey materials, answer sheets, and a return envelope by mail. Respondents then completed the survey using the answer sheets and returned their responses to CANY using the return envelope provided.

CANY's survey on routine and preventative medical care was designed to better understand the medical and healthcare experiences of incarcerated people, primarily including questions on preventative health, routine screenings, and medical history.

The survey was restricted only to people who had been incarcerated for more than five years and were 50 years of age or older. The medical survey was distributed to 3,017 people across New York's prisons and from this sample, 1,185 medical surveys were completed and returned.

Post-visit surveys were provided to a sample of incarcerated people after each in-person monitoring visit in order to provide an additional opportunity to share information about living conditions and other issues. While most of the survey is comprised of general survey questions that all respondents answer across facilities, each survey also had a small number of facility-specific questions, focused on issues that were reported at a given prison during in-person monitoring visits. These surveys also included an additional narrative response form for collecting qualitative data from incarcerated people and giving them the opportunity to use their own words to describe their experiences. Similar to the post-visit surveys, these forms are uniform across facilities but also include a small number of facility specific questions. Throughout this report, first-hand accounts have been excerpted from these forms to reiterate the salient themes from monitoring findings. This reporting period, the post-visit surveys were distributed to people incarcerated at Auburn Correctional Facility, Five Points Correctional Facility, Southport Correctional Facility, and Elmira Correctional Facility.

ANALYSIS OF ADMINISTRATIVE DATA FROM DOCCS

CANY obtained population data from DOCCS through a FOIL request. This dataset contains a snapshot of every person 18 years of age or older in DOCCS custody, including name, Department Identification Number (DIN, a unique, identifying number assigned by DOCCS), demographic data, and data related to their sentencing and incarceration. Analyzing this data involved a number of basic, descriptive statistical tests to establish demographic information and context about the people that were in DOCCS' custody during the reporting period.

METHODOLOGICAL CONSIDERATIONS AND LIMITATIONS

CANY recognizes that there are various approaches to oversight, each with their own strengths and challenges. Some methodological limitations that should be acknowledged for this report include the logistical coordination of monitoring visits, the reliability of the demographic information reported by DOCCS, the unique characteristics of Southport Correctional Facility, and the usual considerations surrounding self-reported survey data.

CANY has limited control over which dates are selected as monitoring dates. While CANY is required to provide DOCCS with a 30-day notice for an anticipated visit, it is ultimately at DOCCS' discretion to confirm the proposed dates or suggest alternate times. These variables influence how and when our monitoring work is completed.

The reliability of the demographic data provided by DOCCS presents another methodological concern. While the data collected by CANY is largely self-reported, DOCCS demographic data is assigned upon intake. In assigning demographic factors to incarcerated people rather than asking them to self-report their demographics, the accuracy of racial, ethnic, and sex

categorizations becomes a matter of perceived phenotype rather than identity. An additional consideration is the variation among correctional facilities themselves. Southport Correctional Facility, for example, is comprised almost entirely of Special Housing Units (SHU) where incarcerated people are kept in individual cells for 23 hours every day.¹⁰ Because of this, survey items related to experiences in SHU (e.g., “How many days were you held in SHU?”) are likely to be overrepresented at Southport compared to other facilities, where most of the incarcerated people are in general population.

Lastly are the considerations present when working with survey data. Because the items in the medical and post-visit surveys rely exclusively on self-reported data, they are vulnerable to response biases, as with most surveys of this nature.¹¹ Response biases occur when respondents answer survey items inaccurately. While this can happen for a variety of reasons, such as the physical environment where they take the survey or as a matter of social desirability (i.e., answering questions to describe oneself in a favorable light), one factor that incarcerated people report to CANY is the belief that DOCCS staff will read outgoing correspondence and seek retribution. Fear of surveillance may therefore play an important role in response biases.

¹⁰ Southport also houses a work “cadre,” which is a small group of incarcerated individuals assigned to facility maintenance and janitorial functions.

¹¹ Delroy L. Paulhus and Simine Vazire. “The self-report method,” in *Handbook of Research Methods in Personality Psychology 1* (New York: Guilford Press, 2007), 224-239.

DEMOGRAPHIC INFORMATION

The DOCCS “under custody” data as of July 1, 2019¹² is outlined below to provide context to the findings in this report and to provide clarity on the population affected by the issues.

On July 1, 2019, a total of 45,045 people were incarcerated in DOCCS facilities. Incarcerated people designated as “male” by DOCCS comprise 95.5% of the prison population in New York.

The demographics of the people incarcerated in New York, similar to those of other states and nationally, show stark racial disparities and an aging prison population.¹³ The total for both men and women combined is as follows: Asian (272), Black (24,063), Native American (570), White (14,183), Other (5,671), and no race assigned (286). While Black New Yorkers account for 15.7% of the state population,¹⁴ Figure 12 shows they are 53.4% of New York State’s prison population. The racial disparity increases for young Black New Yorkers between the ages of 18 and 24, who comprise 61.0% of all people incarcerated in that age range.

RACIAL COMPOSITION OF INCARCERATED PEOPLE IN NY STATE

SOURCE: JULY 1, 2019 NYS DOCCS CUSTODY REPORT

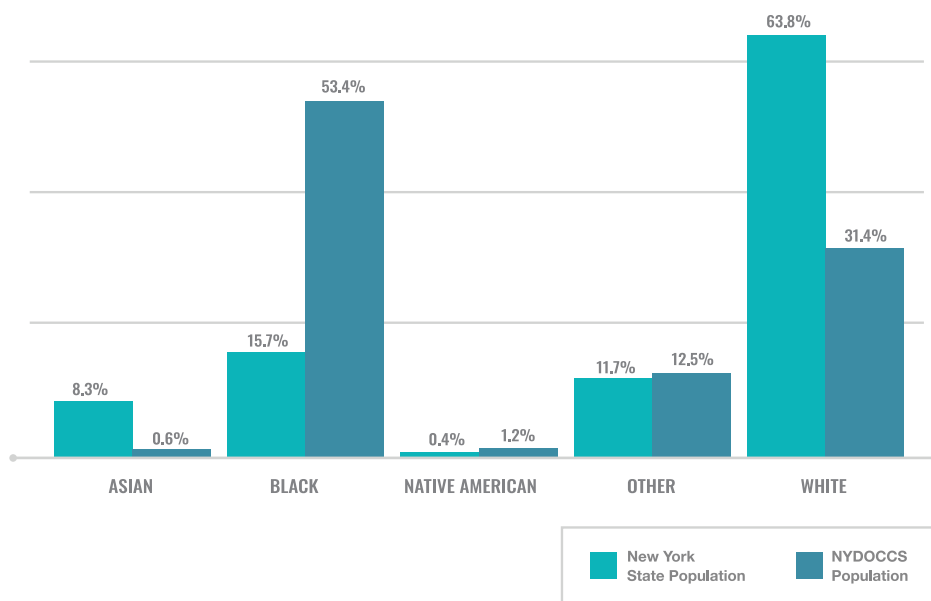


Figure 1. Percentage of total NYS population and DOCCS population by race

¹² July 1, 2019 is the date closest to the monitoring visits specified in this report. The demographic categories (race, ethnicity, sex, etc.) used here are the same as those used in DOCCS reporting. Unless otherwise specified, the source of the data presented was a July 1, 2019 snapshot of DOCCS incarcerated population provided by the DOCCS FOIL Unit.

¹³ U.S. Department of Justice, Bureau of Justice Statistics, Prisoners in 2017 (Washington, D.C., 2019).

¹⁴ U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates, Table DP05.

Latino New Yorkers are also overrepresented in prison: they make up 19.2% of New York State’s population¹⁵ but 22.8% of New York State’s prison population. There are 10,291 people in DOCCS custody that DOCCS has identified as “Hispanic”.

ETHNIC COMPOSITION OF INCARCERATED PEOPLE IN NY STATE

SOURCE: JULY 1, 2019 NYS DOCCS CUSTODY REPORT

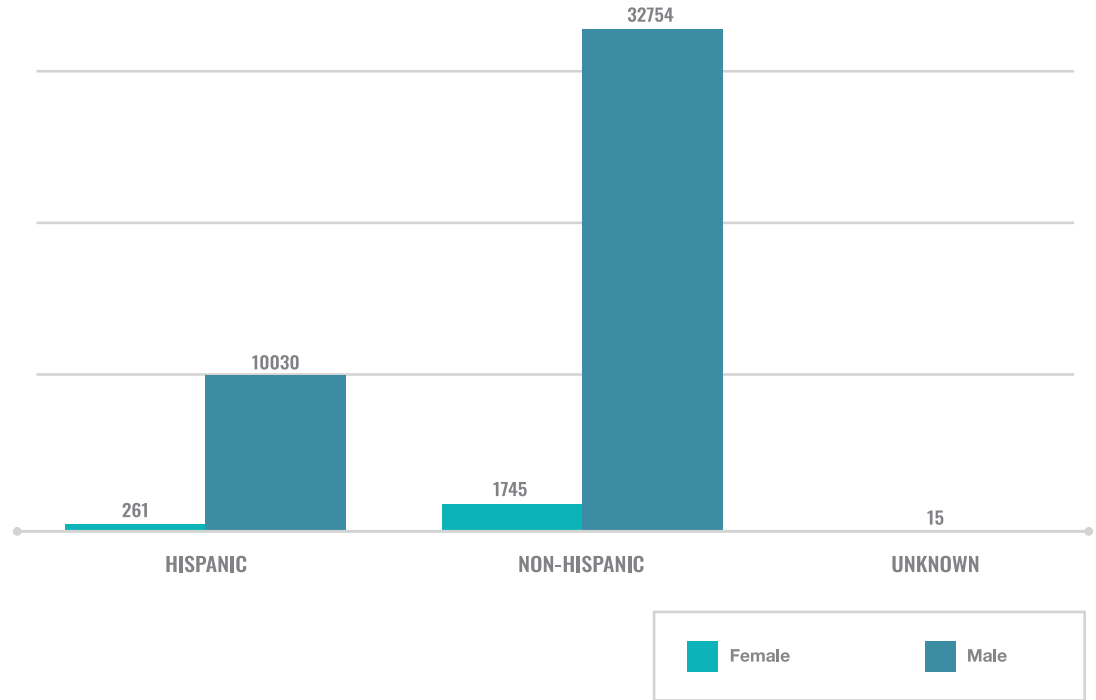


Figure 2. Number of people classified by DOCCS as Hispanic or non-Hispanic

In order to better understand the distribution of incarcerated people in prisons across the state, CANY conducted an analysis according to distance from the county of conviction, which is often presumed to be the last county of residence. CANY considered each incarcerated person's county of conviction, found a midpoint (or the centroid) of that county, and measured the average one-way driving time from the midpoint to each prison in New York. This data provides insight into how far away incarcerated people are from their communities and families. Figure 3 shows that although the median one-way driving distance from home counties to prisons is approximately three hours, some incarcerated individuals are held nearly eight hours from their home county.

**THE DRIVING DISTANCE TO EACH INCARCERATED PERSON
FROM THEIR PRESUMED HOME COUNTY**

SOURCE: JULY 1, 2019 NYS DOCCS CUSTODY REPORT

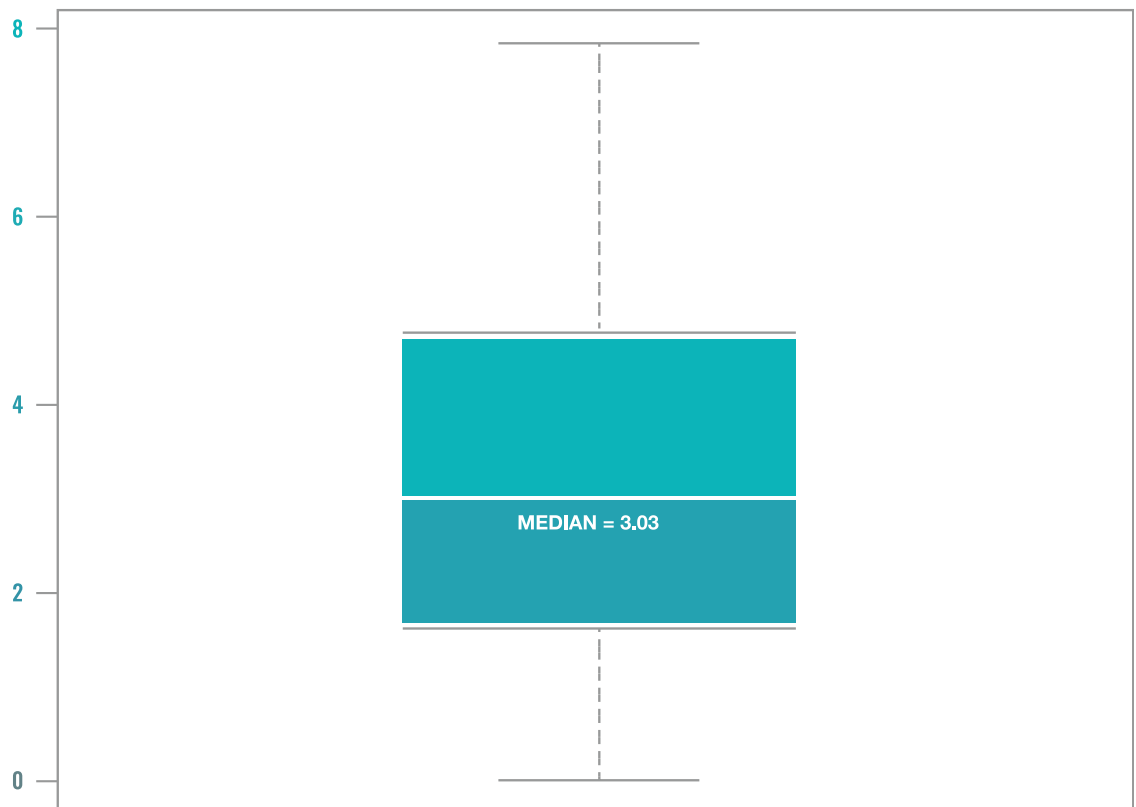


Figure 3. A summary of the distribution of driving distances to state prisons from the county of conviction of people incarcerated in New York.

People in DOCCS custody age 45 to 54 totaled 8,102 (17.9% of DOCCS population), while 5,645 people (12.5% of DOCCS population) were 55 years old or older. Although the subset of people aged 55+ is not proportionally larger compared to the general population, it is still a critical trend to monitor due to the complex medical needs that increase and become more costly as people age. According to the New York State Health Foundation, the average life expectancy in New York is 80.4 years,¹⁶ but for incarcerated New Yorkers, life expectancy decreases by two years for every year incarcerated.¹⁷

AGE COMPOSITION OF INCARCERATED PEOPLE IN NY STATE

SOURCE: JULY 1, 2019 NYS DOCCS CUSTODY REPORT

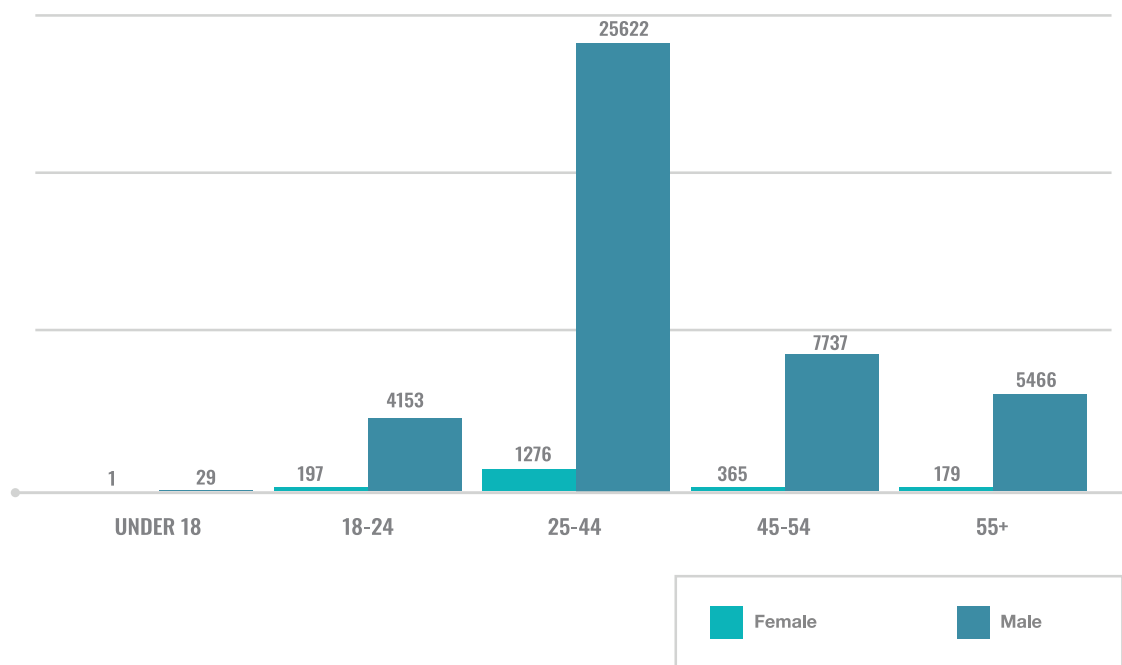


Figure 4. Incarcerated people in DOCCS custody by age and sex

¹⁶ "Trends in Life Expectancy for New Yorkers", NYS Health Foundation, December 13, 2017, <https://nyshealthfoundation.org/resource/trends-life-expectancy-new-yorkers/>.

¹⁷ Emily Widra, "Incarceration shortens life expectancy", Prison Policy Initiative, June 26, 2017, https://www.prisonpolicy.org/blog/2017/06/26/life_expectancy/

MONITORING VISITS DURING THE THIRD QUARTER OF 2019

CANY conducted monitoring visits at four state correctional facilities between July and September 2019: Auburn Correctional Facility, Five Points Correctional Facility, Southport Correctional Facility, and Elmira Correctional Facility.

FACILITY	DATE VISITED	# OF INCARCERATED PEOPLE IN FACILITY AS OF JULY 1, 2019	# OF INCARCERATED PEOPLE INTERVIEWED AND % OF TOTAL POPULATION	# OF POST-VISIT FOLLOW-UP SURVEYS RECEIVED
Auburn Correctional Facility	July 16, 2019	1,303	195 14.9%	139
Five Points Correctional Facility	July 17-18, 2019	1,155	368 31.8%	101
Southport Correctional Facility	August 14, 2019	373	56 15.0%	27
Elmira Correctional Facility	August 15-16, 2019	1,501	233 15.5%	119

Table 1. Overview of Facilities Monitored

The purpose of CANY’s monitoring visits is to gather information of sufficient quality and substantiation to provide DOCCS, the legislature, and the public with an understanding of how current conditions and treatment impact the lived experience of incarcerated people. CANY frames issues in relation to their compliance with DOCCS directives, and applicable national and international standards. This section provides an overview of the main issues raised by people incarcerated at the four facilities CANY visited during this quarter. The issues presented draw on information gathered during in-person interviews, post-visit follow-up surveys, and unsolicited letters mailed to CANY, as well as additional information provided by staff and visual observations by CANY representatives. All graphs presented below are based on surveys completed by incarcerated people across each facility.

CANY has developed recommendations that directly address key issues identified in each of the following categories: material conditions, healthcare, services, cell confinement and discipline, interpersonal relations, and the grievance system. These recommendations are intended to be realistic as well as implementable, and ultimately to generate tangible benefits to both incarcerated people and staff. CANY has prioritized providing recommendations for issues in which sufficient information has been gathered to allow for specific actions to be proposed, and of which implementation would produce the greatest improvements in quality of life. However, these are not the only areas which require actions, and solutions should be considered for all issues presented here.

► MATERIAL CONDITIONS

To ensure findings on material conditions would be relevant to DOCCS, CANY asked incarcerated people to evaluate whether or not their housing unit meets DOCCS' definition of a habitable cell. According to DOCCS directive #4009¹⁸, a habitable cell should contain proper lighting, bedding, storage and a functioning toilet, sink, and shower.

Only 46.9% of respondents stated they had habitable housing, suggesting a widespread failure by facilities to meet DOCCS' own definition of minimum standards. Independent verification of this finding through the collection of quantitative information through CANY's visual observations will be required during future visits, and CANY stands ready to partner with DOCCS on a program for the collection of this data to coordinate on understanding the extent of the problem. In the short-term, through visual observation and consultation with DOCCS staff, CANY has identified and verified a number of specific issues of concern that require immediate action.

At Auburn Correctional Facility, New York's oldest operating prison, respondents raised a number of serious concerns about deteriorating physical infrastructure and primitive living conditions. These concerns included nonfunctional radio outlets in cells; broken windows in housing blocks C and D and the resulting unhealthy conditions (specifically, the presence of bird droppings and, in the winter months, extreme cold); poor ventilation in the SHU in the summer months due to physical barriers over the cell doors (a concern which was also raised at Five Points, where the cell doors are solid metal instead of bars); and water of questionable quality which, according to respondents, staff members themselves do not drink. CANY representatives personally witnessed broken windows, poor ventilation, and staff members carrying gallon jugs of water through the front gate as they arrived at work. During a follow-up conference call on November 7, 2019, DOCCS officials informed CANY that the radio plug repair project is underway; that the window replacement project is part of the five year capital plan and windows in blocks C and D are scheduled to be replaced in 2021; that additional fans had been placed in the SHU; and that water at the facility is tested annually by the City of Auburn.

*It's similar to being outside without the wind!
Like sleeping outdoors without a campfire.*

*"It's similar to being outside without the wind!
Like sleeping outdoors without a campfire."*

Written Account 1. Response to a question about living in a housing block with broken windows during the winter

CANY representatives fielded related complaints at Southport, which is a SHU facility, and Elmira, which, in addition to a general confinement population, houses a reception center for intake and classification of individuals newly admitted to DOCCS. At Southport, respondents complained about a lack of appropriate heating and ventilation, problems with water quality, and black mold. At Elmira, respondents cited poor maintenance inside cells, including broken toilets, broken lights, leaking vents, vermin, and lack of ventilation. CANY has requested a follow-up call with DOCCS about findings from Southport and Elmira, but that request has not been granted; therefore, the status of the concerns raised above is unknown.

Recommendations:

- CANY recommends that DOCCS develop criteria for the repair of key maintenance problems across DOCCS facilities, ensuring that improvements which would have a significant impact on the health and safety of incarcerated people and staff are prioritized. These criteria should be published, along with annual progress reports toward completing the planned improvements.
- CANY further recommends that the legislature review the planning process for capital improvements in DOCCS facilities.

HEALTHCARE

▶ ACCESS TO MEDICAL CARE

While this report does not address medical service from a clinical standpoint, it highlights key issues related to availability of services and staff across DOCCS facilities. Access to all forms of care -- medical, dental, and mental health -- was the single most frequently cited healthcare issue across all four facilities visited. DOCCS has acknowledged staffing shortages as a system-wide challenge, and the agency is reportedly addressing these shortages through a range of approaches, including occupational and geographic pay differentials to achieve parity across locations and better attract candidates; recruitment within the agency as well as at medical schools and job fairs; public education about the opportunities presented by working in correctional healthcare; and countering stereotypes about the risks of working inside prisons in New York. The agency is also reportedly in the final stages of identifying a procurement process for the creation of an electronic medical record (EMR) to replace its current paper-based system.¹⁹

While some of their healthcare issues may be attributable to understaffed facilities and a backlog of medical requests, respondents also reported other barriers to receiving appropriate healthcare treatment. These barriers include distrust of healthcare providers and reports of mistreatment by staff. In a post-visit survey sent to the four facilities CANY visited, incarcerated people were asked to answer questions about their experiences with medical, dental, and mental healthcare. Figure 6 illustrates rates at which respondents were able to access medical care during the preceding one-year period.

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

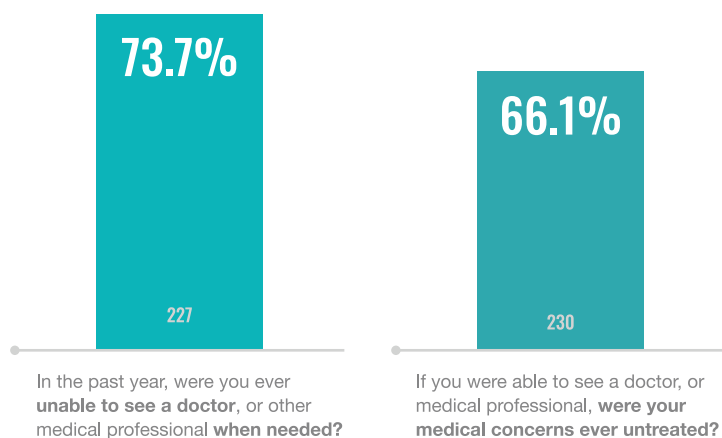


Figure 6. Cross-facility response to survey item addressing access to medical care

▶ ACCESS TO DENTAL CARE

Incarcerated people frequently reported experiencing significant gaps in dental care. Three of the four facilities (Five Points, Elmira and Southport) had no full-time dentists at the time of CANY’s monitoring visit. According to DOCCS, visiting dentists from other facilities are made available when possible, and incarcerated individuals may also be temporarily transferred to neighboring facilities for dental care.²⁰ One individual informed CANY representatives that he had recently been transported from Five Points to Attica for a dental procedure.

During the monitoring visits, many incarcerated people indicated that they had been waiting several months, not just for routine care like cleanings, but also for extractions, replacement fillings, and other more urgent procedures. One individual reported that he had been waiting to receive dentures for almost a year and had been unable to eat any meat or fruit throughout this time. Another individual reported having pulled out his own tooth because it was too painful to continue waiting for a dentist to see him.

The number of cases and duration of delays suggest a systemic failure across multiple facilities to fulfill DOCCS Directive #4300, which provides that the dental care in DOCCS facilities “meet the same standards of quality that can be reasonably provided to other persons situated in the general community who are not confined to a correctional facility.”²¹ Figure 7 reveals the percentage of people who either requested to be seen by a dentist and were unable, or were seen but still had untreated dental concerns.

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

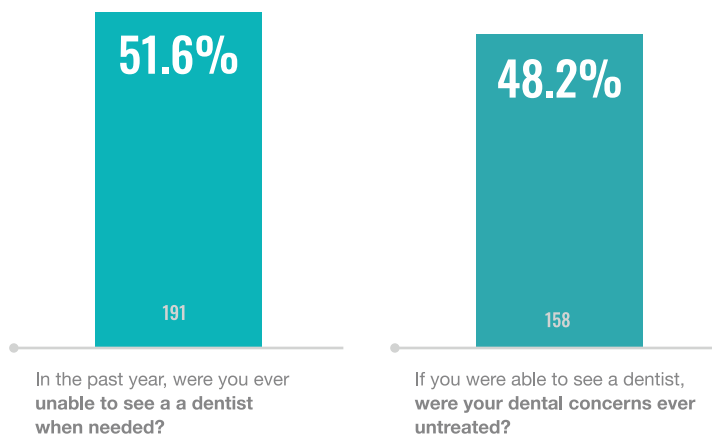


Figure 7. Cross-facility response to survey item addressing access to dental care

20 CANY, conference call with DOCCS, November 7, 2019.

21 DOCCS Directive #4300, “Health Service Policy Manual”, Dental Program, Dental Services 2.01(I)(A)(1), New York Department of Corrections and Community Supervision, <https://doccs.ny.gov/system/files/documents/2019/08/4300%20Health%20Services%20Policy%20Manual.pdf/>.

► MENTAL HEALTH

Mental health treatment is provided in DOCCS facilities by the State Office of Mental Health (OMH), including a range of services including crisis intervention, individual short and long term counseling, group counseling, and special residential and outpatient programs.²² According to the information most recently published by OMH, there were 10,485 incarcerated individuals on the OMH caseload as of December 31, 2016.²³

Respondents generally characterized mental health services availability as limited due to a variety of barriers to effective care. These reported barriers include limited access to individual counseling or therapy, an over-reliance on psychotropic medication, and obstruction on the part of DOCCS security staff.

It did not happen to me
but I did witness officers & Sergeant beat
up an inmate because he asked to see
Mental health because he was feeling suicidal
but the Guards beat him up because they was
Mad that he Ask to Go to Mental Health.

"It did not happen to me but I did witness officers & sergeant beat up an inmate because he asked to see Mental Health because he was feeling suicidal but the guards beat him up because they was mad that he ask to go to Mental Health."

Written Account 2. Description of a staff response to a mental-health crisis

Both Auburn and Five Points Correctional Facilities operate Intermediate Care Programs (ICP), which are residential treatment programs for individuals with serious mental illness.²⁴ There were 29 individuals in the Auburn ICP and 21 in the Five Points ICP as of July 1, 2019. Residents of the ICP units consistently reported satisfaction with the treatment received and their living environment. Such accounts contrast with reports from people confined in the general housing areas, who frequently reported difficulty accessing adequate mental health care. One of CANY's thematic priorities for 2020 will focus on understanding the journey of incarcerated people through mental health services.

²² "New York State Department of Corrections and Community Supervision Bureau of Mental Health Mental Health Program Descriptions", NYS Office of the Professions, July 5, 2011, <http://www.op.nysed.gov/surveys/mhpsw/doccs-att6.pdf/>.

²³ CANY is awaiting a response to a FOIL request for more updated information.

²⁴ The Intermediate Care Program is a non-disciplinary DOCCS/OMH residential treatment program for persons with serious mental illness. ICP units are in the following facilities: Albion, Attica, Auburn, Bedford Hills, Clinton, Elmira, Fishkill, Five Points, Great Meadow, Green Haven, Mid-State, Sing Sing, and Sullivan.

The impression among many incarcerated individuals is that the reason for the difficulties faced in accessing services is fundamentally due to a lack of willingness on the part of security staff who do not wish to do the extra paperwork and do not support the provision of mental health care. Figure 8 illustrates the percentage of respondents who stated they either requested mental health treatment but were never seen or were seen by mental health staff but not treated.

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

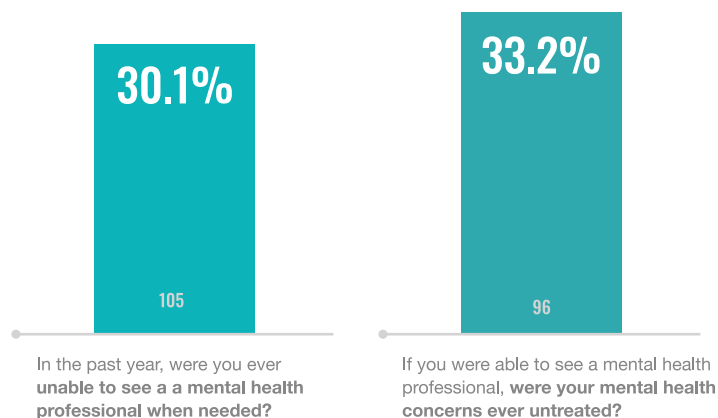


Figure 8. Cross-facility response to survey items addressing access to Mental Health Care

Just over 12 percent of people surveyed reported having engaged in self-harm during the past twelve months, while almost 24 percent of respondents admitted to either having attempted suicide or having had serious thoughts about attempting suicide.

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

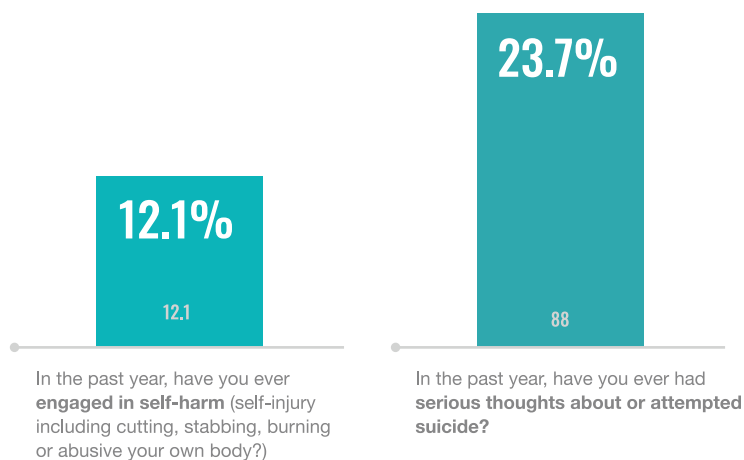


Figure 9. Cross-facility response to survey items addressing self-harm

Recommendations:

- According to DOCCS, the agency has made concerted efforts to overcome challenges in the recruitment of medical staff across DOCCS facilities. The agency is also reportedly in the final stages of identifying a procurement process for the creation of an electronic medical record (EMR). These actions are essential in meeting the Health Services Policy Manual guidelines.
- In addition to improving recruitment, CANY recommends that specific actions be taken by DOCCS to alleviate some of the resulting gaps in the quality of medical services by improving preventative care through routine screenings, education, and outreach.
- CANY further recommends DOCCS develop an electronic system for tracking requests for care and the response.
- CANY recommends that the legislature reintroduce a bill to establish oversight of DOCCS healthcare services by the State Department of Health.

SERVICE PROVISION

The purpose of this section is to provide a high-level overview of the availability of and level of satisfaction with services provided by DOCCS. In this section, “services” refers to phones, recreation, library, visiting, programs, and religious services. To develop this overview, respondents were asked whether they were presently able to access a variety of services to the extent permitted under their current level of security classification and/or disciplinary status.

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

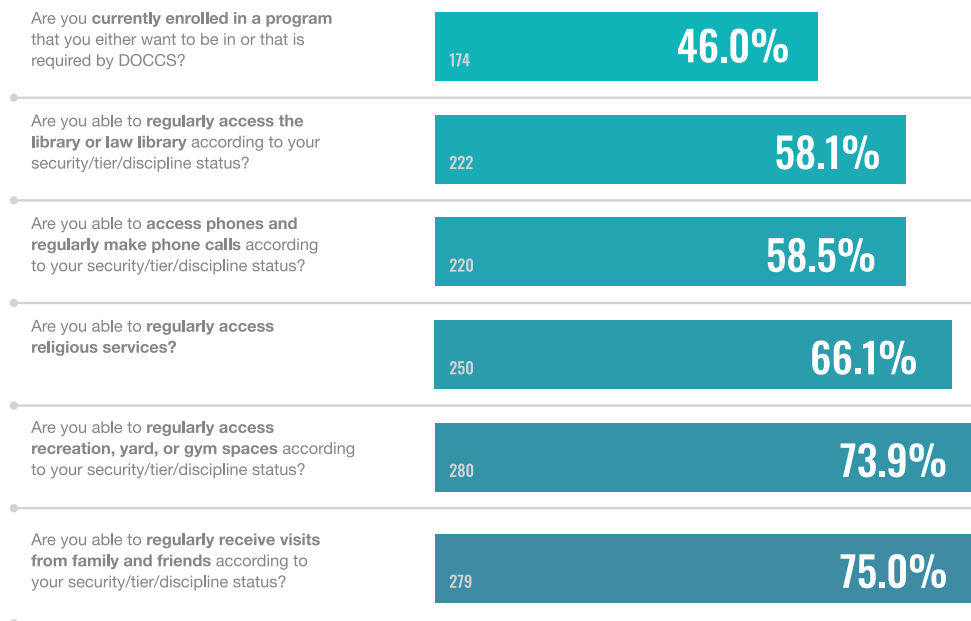


Figure 10. Cross-facility response to survey items addressing access to services

► REHABILITATIVE PROGRAMS

Fifty four percent of respondents indicated that they are not currently in an assigned program that they want to attend or that may be required of them by DOCCS. Completion of required programs is a prerequisite to participating in the Family Reunion Program (FRP)²⁵ or seeking a Limited Credit Time Allowance (LCTA).²⁶ Many incarcerated people reported to CANY representatives that they have been on waiting lists for years for programs required by DOCCS. Due to limited availability of these programs, DOCCS prioritizes individuals closest to their release dates. This arrangement can result in frustration, for example, for those with decades remaining on their sentences who would like to participate in the FRP.

The FRP is, of course, very beneficial, as there's nothing else in prison that makes one feel as good, or is as good for one's mental health and sense of well-being as visiting with one's wife (or whomever) and family. Also, it helps to maintain one's connection with the outside world.

"The FRP is, of course, very beneficial as there's nothing else in prison that makes one feel as good or is as good for one's mental health and sense of well-being as visiting with one's wife (or whomever) and family. Also, it helps to maintain one's connections with the outside world."

Written Account 3. Description of the benefits of the Family Reunion Program (FRP)

At Southport, individuals serving a SHU term complete their academic programming through cell study, during which individuals work independently on assigned topics and have occasional contact with academic instructors who come to their cells. At the time of the monitoring visit, there were six cell-study instructors and 240 SHU participants. CANY representatives spoke with academic instructors who indicated that they use photocopied chapters from outdated textbooks to administer cell study in order to avoid copyright issues. At Elmira, many incarcerated people reported having been assigned to a program for only one three-hour module per day. They characterized the lack of programming as contributing to boredom and a negative environment.

²⁵ The FRP is governed by DOCCS Directive 4500 and it allows incarcerated people to spend extended periods of time with their families in privacy.

²⁶ The LCTA is a six-month credit against the sentence of people who are not eligible to earn merit time. It allows for the possibility of release six months earlier than the originally calculated release date. See, DOCCS Directive 4792.

During interviews CANY conducted at the facilities, individuals enrolled in college programs expressed strong satisfaction with their courses; several individuals indicated that they were on waiting lists for college. The Cornell Prison Education Program provides college courses at Auburn, Five Points, and Elmira²⁷ in partnership with local colleges. Vocational programming²⁸ is available at Auburn, Five Points, and Elmira, and in general, individuals CANY interviewed appreciated the opportunities to learn trades and develop their skills. CANY representatives frequently received complaints, however, that vocational skills offered through these programs are obsolete or not in demand.

▶ ACCESS TO PHONES

CANY representatives received numerous complaints about the insufficient number of phones, the lack of time to use phones, and correctional officers inappropriately restricting access to phones. As shown in Figure 11, almost 42 percent of respondents indicated that they were not able to regularly access the phones to make calls. People incarcerated at Auburn, Five Points and Elmira attributed this to not having enough phones in the recreation yards, which is where most phone calls are made year-round. According to the superintendent at Elmira, additional phones were slated for installation in the recreation areas.

▶ LAW LIBRARY

Most prisons offer law library hours across three or four daily modules in compliance with, and sometimes in addition to, what is required by DOCCS Directive 4483. CANY representatives received a number of reports, however, that the physical space in law libraries is usually too small to accommodate more than 15-25 people at one time. At Southport, individuals serving a SHU term are not permitted to access the physical law library; instead, they have traditionally received law library materials in their cells. DOCCS reported that, across the system, individuals in SHU would soon receive tablets allowing them to access law library materials digitally.²⁹

▶ VISITING

CANY representatives received numerous reports from incarcerated individuals about logistical and physical barriers to receiving visitors. At Auburn, CANY representatives were informed that in an effort to manage visiting room capacity, facility staff had begun terminating some visits early and had ended the practice of giving preference to families who traveled greater distances to the facility. Incarcerated individuals also noted that the facility administration had recently implemented a policy that prohibited an individual from receiving a visit on the weekend if he has already received one during the week. DOCCS reported that the visiting room at Auburn had been undergoing construction during this reporting period, which resulted in temporarily reduced capacity, but noted that the work is now complete.³⁰ Incarcerated individuals also reported visit cancellations at Elmira, in addition to waits of up to

27 Southport does not offer college courses or vocational programming to people in SHU.

28 A searchable list of programs offered at each facility is available on the DOCCS website: <https://doccs.ny.gov/programs>

29 CANY, conference call with DOCCS, November 7, 2019.

30 Ibid.

two hours for visitors going through security. At Five Points, the visiting room is furnished with concrete barriers bisecting long stainless steel tables which, according to respondents, make talking and basic physical contact very difficult.

Exceedingly long processing time and officers attitude & lack of professionalism has discouraged friends from visiting
Lack of funds has prevented family & friends from visiting

“Exceedingly long processing time and officers attitude and lack of professionalism has discouraged friends from visiting. Lack of funds has prevented family and friends from visiting.”

Written Account 4. Description of the barriers to receiving visits while in prison

Recommendations:

- CANY recommends that DOCCS engage an external evaluator to assess the quality, availability, enrollment, and efficacy of its rehabilitative and vocational programming. The report should engage incarcerated individuals in its development and should be released to the public.
- CANY further recommends that DOCCS increase the number of phones in housing blocks, gyms, and recreation yards to ensure that phone are “available to as many inmates as possible,” per Directive #4423.
- CANY further recommends that the legislature authorize and fund the expansion of college programs in prisons throughout the state, with the goal of establishing a college program at every prison.

CELL CONFINEMENT AND UNOFFICIAL DISCIPLINE

In the context of anticipated reforms to the use of solitary confinement,³¹ this section begins to document the prevalence of disciplinary confinement and in-cell isolation and punishments beyond the use of Special Housing Units (SHU). Figure 11 illustrates the rates at which respondents reported having been confined to a cell in the past year, for reasons other than medical confinement. Almost 41 percent of respondents reported having been confined in a SHU, while almost 57 percent reported having been confined under “keeplock,” the term

31 “Statement from Governor Andrew M. Cuomo, Majority Leader Andrea Stewart-Cousins, and Speaker Carl Heastie on Joint Agreement to Overhaul Solitary Confinement Policies,” [governor.ny.gov](https://www.governor.ny.gov/news/statement-governor-andrew-m-cuomo-majority-leader-andrea-stewart-cousins-and-speaker-carl/), June 21, 2019, <https://www.governor.ny.gov/news/statement-governor-andrew-m-cuomo-majority-leader-andrea-stewart-cousins-and-speaker-carl/>.

generally used for non-SHU cell confinement as a result of a disciplinary sanction. Nearly 57 percent of respondents reported having “self-isolated” – in other words, having deliberately chosen not to leave their cells as a way to avoid conflict and/or remain safe.

*Excessive isolation has caused me fear of public settings... seriously
Almost phobia-like fear.*

*“Excessive isolation has caused me fear of public settings...seriously,
almost phobia-like fear.”*

Written Account 5. One person’s description of being in a SHU

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

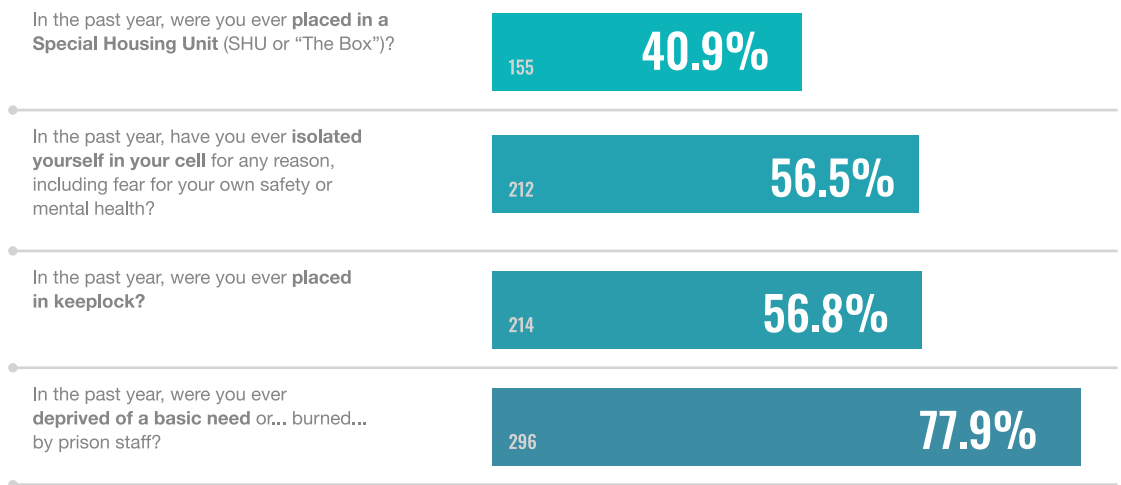


Figure 11. Cross-facility response to survey items addressing types of cell confinement

While isolation or confinement to a cell as the result of a disciplinary sanction is permitted by official rules and regulations, CANY representatives observed that an unofficial form of cell confinement, known as “the burn,” is widespread. Although “the burn” is not an approved DOCCS policy or practice, almost 78 percent of respondents reported having been “burned” in the past year. “The burn” is a punitive measure whereby a corrections officer confines an individual to a cell and prevents that person from accessing a meal, a shower, recreation, or even a required program. Use of “the burn” is not officially tracked by DOCCS. In-person interviews indicates that corrections officers “burn” incarcerated people for a variety of behaviors, including playing a radio too loudly, speaking with another incarcerated person while locked in one’s cell, not having a cell light on during the count, and more. The issue of the burn is of particular importance because it represents an absence of a clearly communicated justification and process for disciplinary action, thereby reducing trust in the integrity of the system and the prison environment in general.

Figure 12 demonstrates that the reported experience of having been “burned” by DOCCS staff (77.9%) is more prevalent than having received a misbehavior report (57.6%), indicating that unofficial, unsanctioned punishment might be more common than the official imposition of punishment.

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

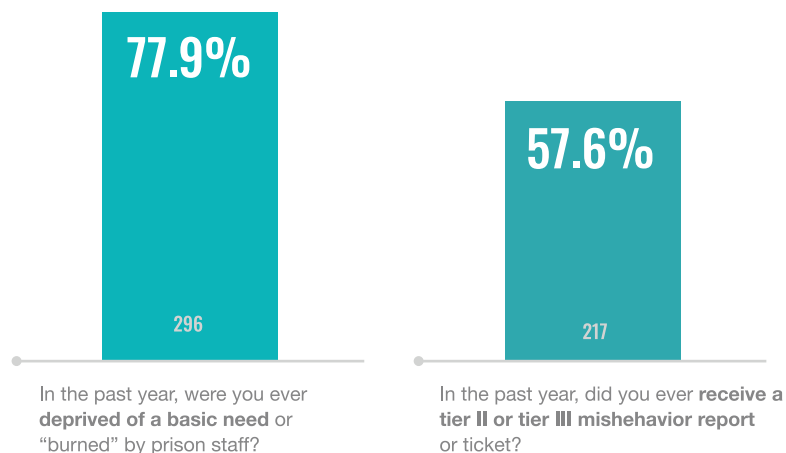


Figure 12. Cross-facility response to survey items addressing discipline

In addition to official and unofficial punitive forms of cell confinement, incarcerated individuals report that lack of access to programs or work assignment results in a large proportion of each day spent in their cell. Again, this finding relates directly to individuals housed in general population at Auburn, Five Points, and Elmira. Individuals in SHU in any of these facilities, in reception at Elmira, or serving SHU terms at Southport experience very limited if any out-of-cell time each day.

Recommendations:

- CANY recommends that DOCCS publish, as part of its monthly report, statistics on the number of individuals held in keeplock during the reporting period.
- CANY recommends that DOCCS conduct a study to understand the reason for and prevalence of “the burn,” which undermines the legitimacy of the formal disciplinary process and contributes to negativity for both incarcerated people and staff. While CANY will develop strategies to understand this issue further, the primary understanding into the extent of use of the practice should be developed by DOCCS through the use of the cameras and logs.
- CANY recommends that the legislature call a hearing to review the progress of implementation of the SHU reforms agreed upon by the Governor, Senate Majority Leader, and Assembly Speaker during the 2019 legislative session. This hearing should also address any increases in other forms of disciplinary confinement, such as keeplock, in response to SHU reforms.
- CANY further recommends that the legislature bring New York in line with international standards by passing long overdue reforms to solitary confinement, codifying dramatic reductions to the use and fundamentally rethinking the purpose of solitary confinement in correctional facilities statewide.

INTERPERSONAL RELATIONSHIPS

CANY acknowledges the significant investment the state has made in the installation of security cameras throughout DOCCS facilities and understands that this capital project is ongoing. In spite of this investment, serious concerns remain about safety and unchecked abuses of power. CANY receives numerous complaints regarding relationships between incarcerated individuals and DOCCS staff. The quality of interpersonal relationships greatly affects the lived experience of incarcerated people as well as working conditions for staff.

During the monitoring visit to Southport, CANY representatives spoke with an individual who, according to DOCCS staff at the prison, had been throwing feces and was subdued after spitting blood in the face of a sergeant. When a CANY representative spoke to him, he was bleeding, had deep indentations on his wrists from handcuffs, had bruises and red marks on his body, and one eye had swollen shut.

I HAVE BEEN LOCKED IN A SHOWER STALL FOR 6 HOURS HERE AT ELMIRA. I'VE HAD MY WATER TURNED OFF SEVERAL TIMES. I HAVE WITNESSED PRISONERS BEING ABUSED BY PRISON GUARDS ON A REGULAR BASIS AT EVERY NYS PRISON I'VE EVER BEEN AT OVER THE PAST 23½ YEARS.

“I have been locked in a shower stall for 6 hours here at Elmira. I’ve had my water turned off several times. I have witnessed prisoners being abused by prison guards on a regular basis at every NYS prison I’ve ever been at over the past 23½ years.”

During monitoring visits, some respondents indicate reluctance to speak freely with CANY representatives because they fear retaliation by DOCCS staff, who sometimes stand within earshot of these cell-front interviews. CANY has requested that, as a beneficial practice for the effective monitoring of DOCCS facilities, DOCCS ensure that staff does not monitor conversations between CANY representatives and incarcerated people.

Other respondents noted that at Five Points, which has security cameras installed throughout, “blind spots” prevent surveillance of some areas, which creates opportunities for abuse. At Five Points, those areas are reportedly in the medical areas and in the elevators.

Figure 13 reveals that 69 percent of people surveyed reported having experienced violence by staff, 82 percent reported having witnessed violence by staff, and 76 percent reported having witnessed or experienced racist behavior by DOCCS staff.³²

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

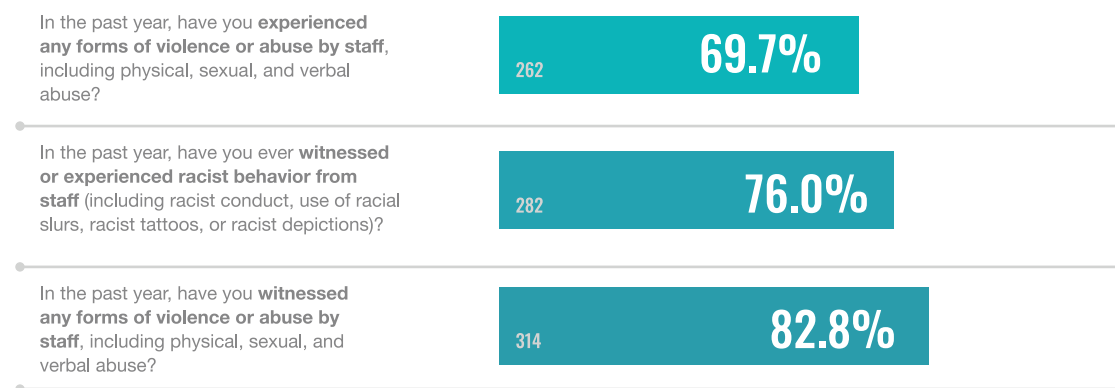


Figure 13. Cross-facility response to survey items addressing negative staff interactions

Recommendations:

- In addition to prioritizing the installation of security cameras in all prisons, CANY recommends that DOCCS identify and eliminate “blind spots.”
- CANY further recommends that DOCCS conduct analysis of the extent to which the presence of cameras reduces unusual incidents and grievances related to staff misconduct.
- CANY recommends that the legislature reintroduce legislation that would establish a temporary multidisciplinary commission to study the cause of violence in prisons.

³² When CANY representatives hear allegations of abuse made against specific corrections officers, the names of those officers and corresponding allegations are included in the post-visit memos sent to the DOCCS Commissioner.

ECONOMIC ISSUES

Economic issues, within the context of this report, pertain to anything that affects an incarcerated person's income, expenses, purchases, and/or items received or sent through the prison's package room. Figure 14 illustrates the five main economic issues covered in post-visit surveys.³³

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

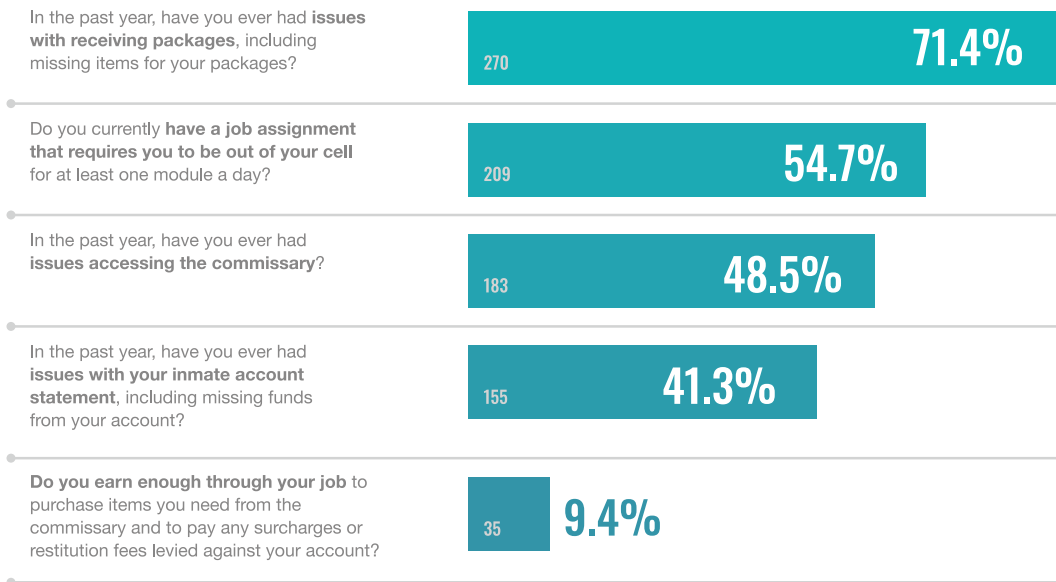


Figure 14. Cross-facility response to survey items addressing financial Issues

Of the economic issues assessed, lack of wages earned through work assignments affected an overwhelming majority of the respondents. Almost 90 percent of respondents indicated that they do not earn enough money to purchase necessary items from commissary or to make any significant payments towards court-imposed fees or restitution. While some incarcerated people in DOCCS custody earn \$0.32 to \$0.64 per hour by working in food services or industry, the majority earns \$0.10 to \$0.26 per hour. One respondent explained that he could not purchase stamps because he had not been assigned to a job or program for months and because he did not have family members to support him.

³³ Questions regarding job or work assignments do not include responses from people incarcerated in the SHU portion of Southport Correctional Facility, as they are not able to complete these programs while in SHU.

I HAVE LOST MY GLASSES & WAS TOLD I HAD TO
PAY \$40 TO REPLACE, I CANT AFFORD IT & NEED
GLASSES.

*"I have lost my glasses and was told I had to pay \$40 to replace.
I can't afford it and need glasses."*

Written Account 7. One individual's description of the financial constraints

As reported above, almost 43 percent of respondents reported not having a job assignment that requires them to be out of their cells for at least one three-hour module per day.³⁴ This, in turn, reduces the amount of money incarcerated people can earn, directly impacting their ability to purchase necessary items from commissary and to pay off court fees that may have been imposed at sentencing. Approximately 41 percent of respondents reported finding discrepancies in their monthly account statements, including missing funds that respondents expected to be there. Additionally, 49 percent of respondents reported difficulty accessing the commissary within the past year. During monitoring visits, CANY representatives learned that access to the commissary room is often delayed due to closure for unrelated security issues. These closures and delays are perceived by incarcerated people as an informal punishment for the entire facility because they result in a chronic backlog, with some people not being able to access commissary until weeks later.

Approximately 71 percent of respondents indicated that they had experienced problems receiving packages. When speaking with respondents at these facilities, CANY representatives learned that the most common problems with packages, in addition to missing items, included not being called to the package room in a timely manner, resulting in the rotting of perishable food items, and the delivery of items that were disallowed by the officer working in the package room on that day, despite meeting the requirements specified by DOCCS Directive 4911.³⁵

Recommendations:

- CANY recommends that DOCCS implement a public-facing electronic system that tracks when packages have arrived at the prison and have been received by the incarcerated individual.
- CANY further recommends that the legislature pass legislation that would substantially increase wages for incarcerated people.

³⁴ See the "Cell Confinement" section, *infra*, for additional implications of not having a job assignment or for having a job assignment that does not require an individual to spend more than one module out of cell each day.

³⁵ DOCCS Directive 4911 allows incarcerated people to receive food items in packages twice a month, as long as the combined total weight does not exceed 35 pounds.

GRIEVANCE PROCESS

This section outlines respondents' experiences with resolving issues through the grievance process, which, according to DOCCS Directive 4040, "provides each inmate an orderly, fair, simple, and expeditious method for resolving grievances, pursuant to Section 139 of the Correction Law, and allegations of discriminatory treatment, pursuant to Part 7695 of Title 9, NYCRR." During this reporting period, respondents cited a range of problems with the grievance system, including filing grievances that never received a response; grievance outcomes that routinely favored staff, whose responses received more deference than testimony or evidence provided by incarcerated people; and retaliation by DOCCS staff for filing grievances.

When I
wrote A grievance I got no response at All on my
case. And one day I got a cell search and A officer
Was reading my Copy of the grievance and Messed
UP MY Cell.

"When I wrote a grievance I got no response at all on my case. And one day I got a cell search and a officer was reading my copy of the grievance and messed up my cell."

Written Account 8. One individual's description of alleged retaliation for writing grievances

I have written grievances on officers that have never been resolved if the grievance is too up close and personal they won't even call you to the grievance office. This facility is the only facility that has cameras and audio in almost all parts of the facility and still they can find you guilty at a disciplinary hearing with all the evidence saying you are not guilty.

"I have written grievances on officers that have never been resolved, if the grievance is too up close and personal they won't even call you to the grievance office. This facility is the only facility that has cameras and audio in almost all parts of the facility and still they can find you guilty at a disciplinary hearing with all the evidence saying you are not guilty."

Written Account 9. One individual's experience with the grievance process

Slightly more than 48 percent of respondents who reported filing a grievance also reported not having received a response. Almost 87 percent reported that their grievances had been denied, while 67 percent reported having suffered retaliation by DOCCS staff for having filed a grievance. At Five Points, unlike most other maximum security facilities, grievance representatives do not have access to any areas of the facility (e.g., housing blocks, package room, etc.) to conduct interviews and/or investigations. This lack of access results in an inability to adequately investigate and review a grievance.

PERCENT AND NUMBER OF INDIVIDUALS RESPONDING YES.

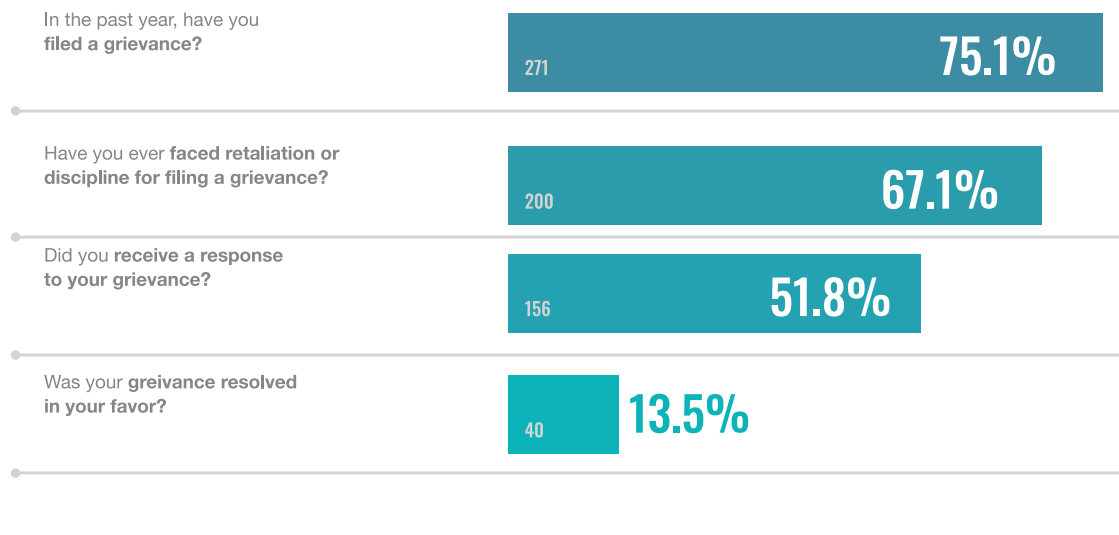


Figure 15. Cross-facility response to survey items addressing experience with the grievance process

Recommendations:

- CANY recommends that, in an effort to increase the effectiveness and legitimacy of the grievance process, DOCCS expedite the planned implementation of an electronic grievance process using tablets.
- CANY further recommends that, in addition to publishing information about types of grievances filed on a semi-annual basis, DOCCS publish information about the rates at which grievances are resolved in favor of the incarcerated individual.
- CANY recommends that the legislature further explore creating an independent correctional ombuds to investigate complaints related to incarcerated persons' health, safety, welfare, and rights.

PREVENTATIVE MEDICAL CARE SURVEY

ABOUT THE SURVEY

In the United States, incarcerated people experience increased rates of illnesses (both stress-related illnesses like heart disease and depression as well as infectious diseases such as tuberculosis, HIV/AIDS, and hepatitis) and have increased mortality rates both while in prison and upon release.³⁶ While incarcerated people are forced to deal with the negative health impacts of incarceration, understaffed and under-resourced prison facilities are tasked with the responsibility of treating these impacted populations—including addressing the needs of an aging prison population in an increasingly complex and expensive healthcare system.³⁷

In July 2019, CANY distributed a medical survey to 3,017 incarcerated people in order to better understand the state of medical care across the facilities run by New York’s Department of Corrections and Community Supervision (DOCCS). To address the health problems of the most vulnerable populations in prison, CANY distributed the survey to people who had both been incarcerated for more than five years and were 50 years of age or older. The survey focused on preventative medical care, asking about routine medical screenings and standard examinations for aging populations and also inquired about the medical history of incarcerated people who may already have noteworthy medical conditions.

DEMOGRAPHICS

CANY received 1,185 completed medical surveys from respondents situated across 45 prisons. According to administrative data received from DOCCS and matched with the survey data, respondents were overwhelmingly male at 98% (n=1,100). 17.7% of respondents (n=198) were identified as “Hispanic” of any race, while 82.3% of respondents were identified as “Non-Hispanic”. The racial breakdown of survey respondents as identified by DOCCS included 627 Black respondents (56.0%), 356 White respondents (31.8%), 117 respondents identified as “Other” (10.4%), 9 Native American respondents (<1%), 3 Asian respondents (<1%), and 8 respondents with no race identified (<1%). The ethnic and racial demographics of this sample closely mirror the overall racial representation of people incarcerated across the DOCCS system.

While the parameters of the survey required respondents to be older than 50 and have been incarcerated for more than five years, the average age and length of incarceration of respondents was higher, at 58 years old and 19 years of incarceration, respectively.

36 Michael Massoglia and Brianna Remster, “Linkages Between Incarceration and Health,” *Public Health Reports* 134, no. 1 (2019): 8S–14S.

37 K Raheleh Heidari, Tenzin Wangmo, Serena Galli, David M. Shaw, Bernice S. Elger, Violet Handtkea, and Wiebke Bretschneider, “Accessibility of Prison Healthcare for Elderly Inmates, a Qualitative Assessment,” *Journal of Forensic and Legal Medicine* 52 (2017): 223–28; Kenneth L. Faiver and Alice Heiserman, *Humane Health Care for Prisoners: Ethical and Legal Challenges* (Santa Barbara, CA: Praeger, 2017).

FINDINGS

► CANCER PRECURSORS

Of the 1,185 respondents who were over 50 and had been in DOCCS custody for more than five years, only 11.4% (n=126) reported having been checked by a member of the staff for moles and growths. A smaller portion of respondents, 16.9% (n=96), reported that they have had moles and growths removed. Of the same population of respondents, 57.5% (n=670) reported that they have had a colon cancer screening.

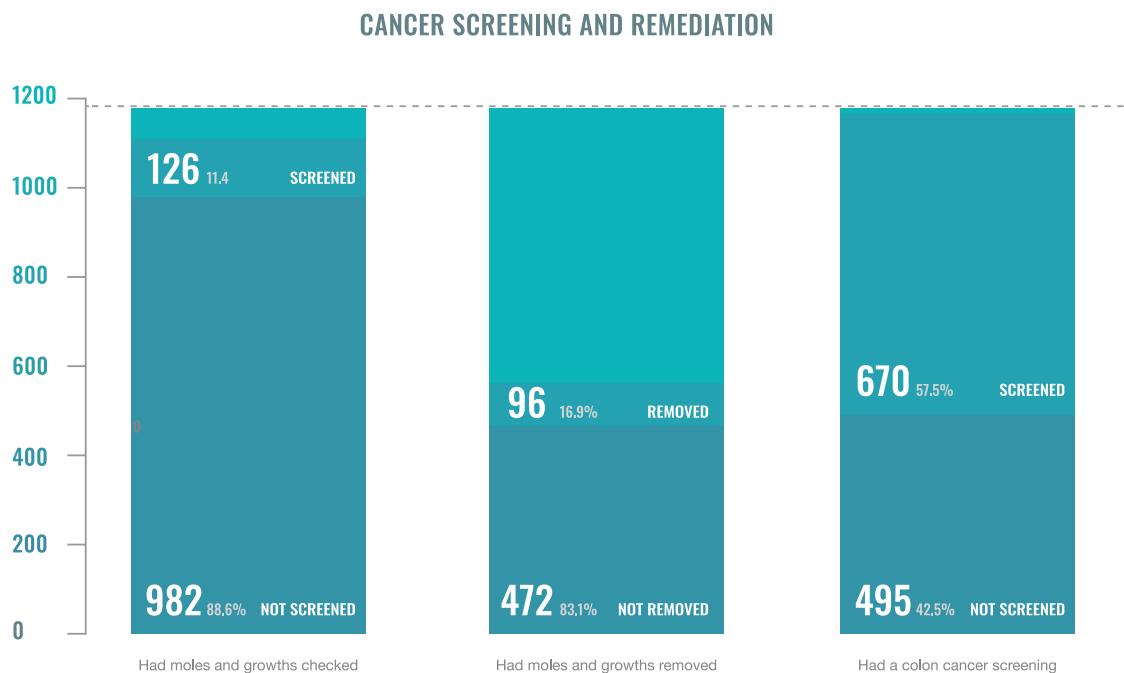


Figure 16. Responses to survey items addressing cancer-related screenings

► OTHER CHRONIC CONDITIONS AND PREVENTATIVE HEALTH

- 44.5% of respondents (n=519) reported having a blood sugar exam administered and having the results from the exam explained to them.
- 49.7% of respondents (n=579) reported having had a cholesterol exam and been told the meaning of their reading.
- 58.6% of respondents (n=659) reported having had a flu shot in the past year.
- 67.5% of respondents (n=753) reported having had a vision or glaucoma screening.
- 72.8% of respondents (n=820) reported having had a teeth cleaning in the past year.

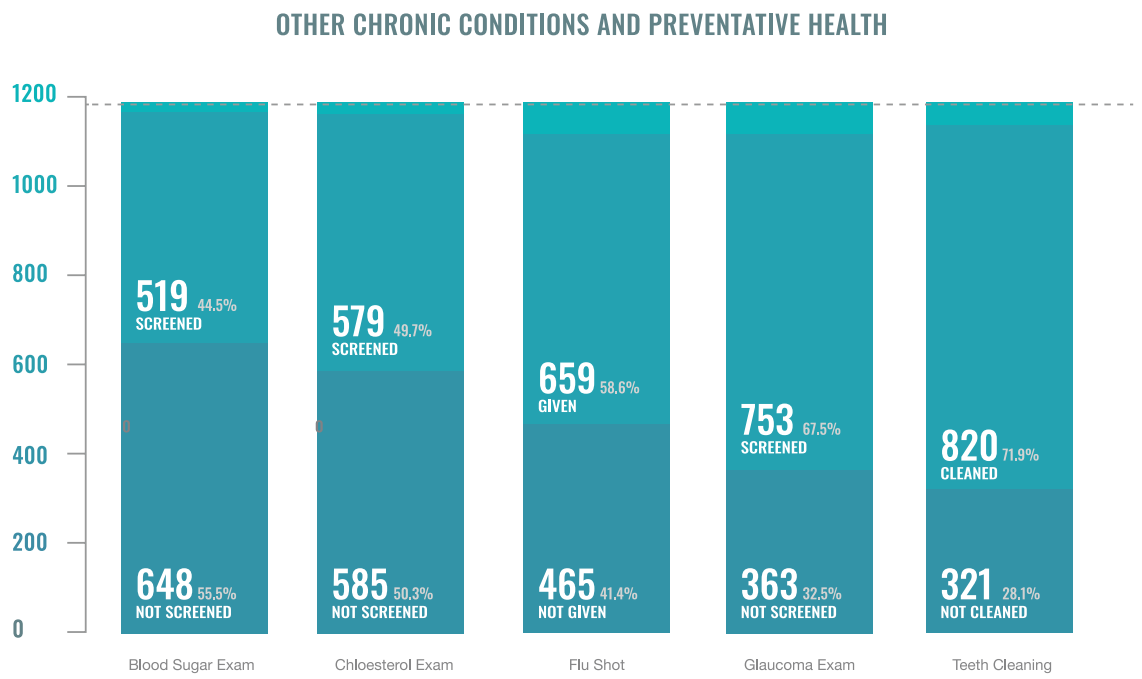


Figure 17. Responses to survey items addressing other chronic conditions and preventative health

► WOMEN'S HEALTH

Of the 98 women respondents who were over 50 and had been in DOCCS custody for more than five years, only 24.5% (n=24) had received a women's health screening.

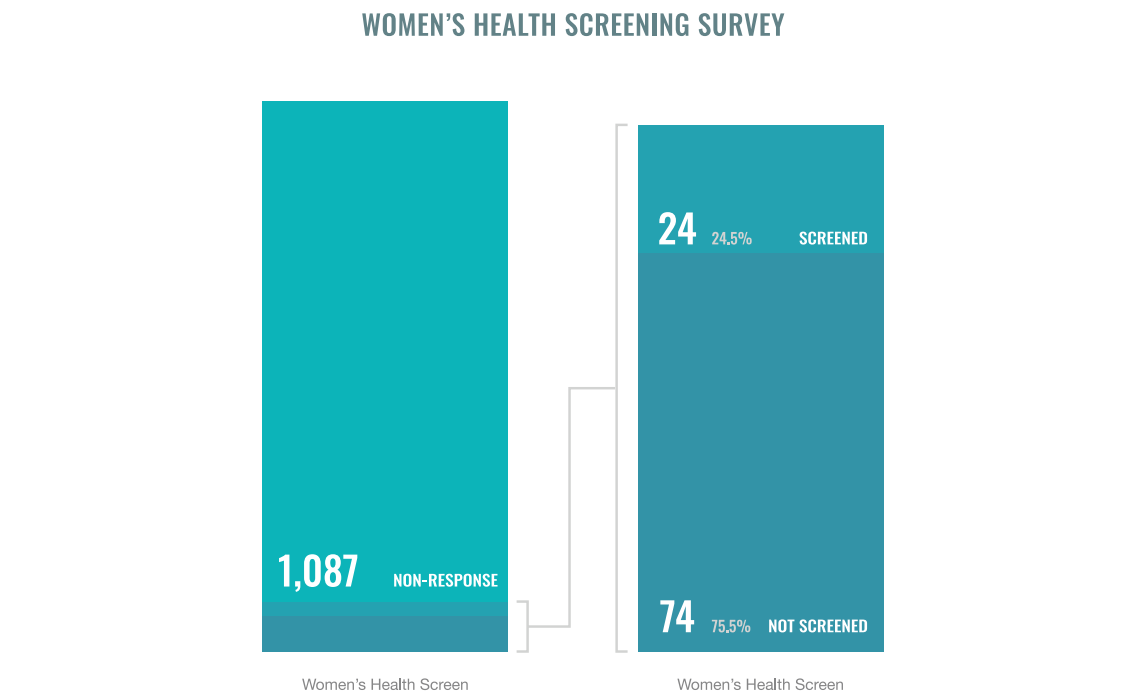


Figure 18. Responses to survey items addressing women's health screening

CONCLUSION

In the preceding pages, CANY has presented numerous examples of alleged failures to meet DOCCS directives within the four prisons monitored and as reported by a group of more than 1,000 individuals who responded to a survey about preventative medical care. Where possible, CANY has presented specific recommendations for actions that can be taken by DOCCS and by the legislature to begin to address these issues. This report will provide a baseline for measuring progress in subsequent monitoring work in 2020 and beyond.

It is intended that these recommendations be viewed as applicable, objective, and fundamentally useful to DOCCS and to the legislature, even as the issues presented raise other questions about material conditions, healthcare, services and programs, isolation and discipline, economics issues, and the grievance process. Through further exploration and analysis of these issues, it is hoped that CANY can play a key role in developing solutions in coordination with DOCCS and the legislature.

CANY will continue to improve its oversight activities through requests for improved information sharing and communication with DOCCS. Specifically, the areas in which CANY seeks to gain agreement from DOCCS during the coming year in order to achieve greater transparency and accountability include:

- **Furnish basic information about facilities before monitoring visits:** For roughly 15 years, DOCCS provided CANY with completed “pre-visit questionnaires” about a given facility prior to a monitoring visit. These questionnaires were furnished outside of the FOIL process and were critical to developing a basic understanding of the facility in advance of monitoring visits. During the summer of 2019, DOCCS discontinued this process without advance notice, advising CANY to seek this information through FOIL requests. CANY has requested a reinstatement of the pre-visit information gathering protocol which was observed for 15 years. CANY seeks to reach agreement with DOCCS on specific timelines for the scheduling, submission, and completion of all questionnaires for 2020.
- **Allow and encourage facility staff to speak with CANY representatives during site visits:** During CANY’s meetings with the facility executive team, DOCCS staff often demonstrate reluctance to answer basic questions about the facility and sometimes suggest they do not have information that common sense suggests they certainly have (for example, the number of people incarcerated at the facility, the number of staff and their racial demographics, the number of people who have died while incarcerated there in the past year, the number of and reasons for lockdowns at the facility, caseload ratios for Offender Rehabilitation Counselors, and so on). CANY has requested that DOCCS staff demonstrate transparency and cooperation by proactively sharing relevant information during monitoring visits.
- **Ensure opportunities for confidential conversations with incarcerated persons and staff:** During monitoring visits, some incarcerated individuals indicate that they are hesitant to speak with CANY representatives for fear of retaliation by DOCCS staff. In recent months, representatives from

CONCLUSION

NYSCOPBA at Auburn Correctional Facility informed CANY representatives that they would be willing to meet, but not with DOCCS counsel in the room. CANY has requested that DOCCS counsel cease sitting in on meetings with members of the Inmate Liaison Committee, members of the Inmate Grievance Review Committee, and union representatives so that individuals may speak openly about their perspectives and experiences. CANY has further requested that DOCCS staff stand out of earshot while CANY representatives speak with incarcerated individuals.

- **Schedule quarterly meetings to discuss CANY's monitoring findings:** CANY has requested that DOCCS schedule quarterly meetings (in person or by telephone) with CANY staff. These meetings should include the following DOCCS senior staff: Commissioner or his designee, Deputy Commissioner and Counsel, Deputy Commissioner Administrative Services, Chief Medical Officer, Deputy Commissioner Program Services, Deputy Commissioner Correctional Facilities, Deputy Commissioner/Chief of Investigations, and the Deputy Commissioner Strategic Planning and Population Management. The purpose of these meetings will be to discuss findings from recent monitoring visits; provide opportunities for CANY to solicit feedback from DOCCS regarding its monitoring activities (e.g., content and scope of surveys, format of monitoring visits, etc.); and create a venue for problem-solving and open lines of communication.
- **Respond in writing to CANY monitoring reports:** CANY has requested that DOCCS respond in writing to its submission of its reports and findings. A written response would not only confirm receipt, but also acknowledge the investment of resources in a body of work that is of central concern to DOCCS. CANY requested that DOCCS provide a public written response to this report, but DOCCS declined.

Through these and other oversight activities, CANY will continue to uphold its commitment to the legislature and the public to shine a light on prisons in New York. Criminal justice reform is a long process, and prisons may represent the last frontier for urgently needed reforms. CANY is as committed to these efforts today as its founders were in 1844.

CONNECTION WITH THE OUTSIDE WORLD:

PRISON MONITORING FINDINGS AND RECOMMENDATIONS

For the Quarter July-September 2019

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