

The Correctional Association of New York

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

GOVERNEUR CORRECTIONAL FACILITY

The Correctional Association (CA) visited Gouverneur Correctional Facility on April 29th and 30th, 2008. Gouverneur is a medium security prison located in Northwestern New York State, in the town of Gouverneur. The prison contains an S-Block and Special Housing Unit (SHU), in addition to a 10-bed infirmary. At the time of our visit, there were 1,075 inmates at the facility, with 857 in general confinement, 197 in the 200-inmate capacity S-Block, and 21 in the 32-inmate capacity SHU.

One of the primary objectives of our visit to Gouverneur included an assessment of facilities and programs. The CA obtained surveys about general prison conditions from 109 men at Gouverneur. In addition, we received surveys from 37 inmates housed in the facility's S-Block and surveys from six inmates in the SHU. We also received surveys from 30 inmates specifically concerning substance abuse programs and surveys from an additional 29 inmates about their needs for substance abuse treatment. We have not included here the results of the substance abuse treatment surveys or our evaluation of the substance abuse treatment program at Gouverneur, as these observations and recommendations will be published in a subsequent report. We have based this report on: findings from our surveys; conversations with the executive staff, program staff, substance abuse treatment staff and inmates; written correspondence with inmates; meetings with staff union representatives and members of the Inmate Liaison Committee and Inmate Grievance Resolution Committee; and observations made during our visit.

In December 2008, we spoke with the executive team and other staff from Gouverneur, along with officials from DOCS Central Office concerning a draft of this report detailing our preliminary findings and recommendations. We found the discussion informative and useful in finalizing this report, and have included information we learned during that conversation.

Summary of Findings and Recommendations

The Visiting Committee was impressed with many areas at Gouverneur. The vocational instructors appeared dedicated and engaged, and the classes received favorable reviews from inmates. We were pleased by the apparently low levels of physical violence, both between inmates and staff and among inmates, as well as the reportedly low levels of gang activity. The librarian seemed devoted to her job, and the general library was well-organized. We commend

the prison on the reduced number of restricted diets in the S-Block and on its increased efforts to negotiate with inmates before taking disciplinary measures. We also noted some problems: the apparently high level of verbal harassment and tension between inmates and security staff; inmates' serious concerns about healthcare; the long-term absence of the prison dentist and the facility's inability to obtain replacement services, leading to inadequate dental services to meet the needs of the prison population; the lack of Spanish-language materials and Spanish-speaking staff in the facility, where the Spanish-speaking population is larger than at many other prisons.

Our recommendations include that state policy makers should work with the Department and facility on implementing the following:

- Hire Spanish-speaking staff;
- Increase the number of vocational programs;
- Assess the level of tension in the facility;
- Institute a training program for staff to increase sensitivity in working with people with diverse backgrounds;
- Fill the nursing vacancy and consider augmenting physician staff;
- Improve the quality of sick call and physician encounters;
- Enhance efforts to identify inmates with HIV;
- Re-evaluate inmates infected with Hepatitis C to determine if more patients may be appropriate candidates for treatment;
- Enhance access to specialty care services and improve follow-up to specialists' recommendations;
- Conduct regular meetings among the Inmate Liaison Committee, Inmate Grievance Resolution Committee and the medical staff to discuss inmates' concerns with healthcare;
- Provide additional dental services and review dental practices concerning extractions;
- Obtain more up-to-date information for Transitional Services concerning programs, housing and job opportunities in the community;
- Install cameras in the SHU and S-Block; and
- Ensure SHU inmates have regular access to library materials.

Gouverneur's General Inmate Population

Compared to statewide averages, Gouverneur has a high number of inmates who identify as Hispanic, with 34% as compared to a system-wide average of 26%, and a low number of those who identify as white, with 11% as opposed to 20%.¹ Slightly higher than state-wide averages, 53% of the inmates identify as African-American. The median age of the population is 34 and 77% are from New York City and surrounding suburbs, as compared to 63% system-wide. As at other medium security prisons, most inmates have the possibility of release within two years, and nearly all the inmates will reach their earliest possible release date within six years. Fifty-one percent of the population was convicted of a violent felony and 29% had a drug conviction, compared with 57% and 21% system-wide, respectively. Forty-eight percent of the prisoners

¹ The statistics in this paragraph are from DOCS' 2008 Profile of the Inmate Population, according to which system-wide averages are: White (20.8%); African-American (51.3%); and Hispanic (25.9%).

have their high school diploma or GED, compared to 54% throughout the state prisons. Nine percent of the inmate-population is Spanish-speaking with limited or no ability to speak English, higher than the statewide average of five percent. The Department of Correctional Services (DOCS) identified 82% of the inmate population at Gouverneur as having a substance abuse history, slightly lower than the system-wide average of eighty-four percent.

Programs

According to data from the facility, only 22 inmates –2.6% of Gouverneur’s general population – are idle (without any program or job assignment). A total of 770 inmates were in programs or jobs for the whole day, with two inmates having half-time program assignments. It is a concern, though, that 254 inmates, nearly 30% of the facility’s general population, were assigned to jobs as porters, which involve performing maintenance and cleaning tasks for the prison and do not generally help individuals to develop transferable skills. Nonetheless, seventy-six percent of inmates surveyed were at least somewhat satisfied with their job placement at Gouverneur.

Consistent with practice at prisons throughout the state, Gouverneur inmates receive limited wages for paid modules. The rate of pay for the state’s prisoners has remained unadjusted for approximately 20 years, although the cost of items in the commissary increases with inflation, and commissary prices are comparable to charges for goods purchased outside the prison. Inmates at Gouverneur, and throughout the state, consistently complain about their growing inability to afford commissary goods.

Predominantly Spanish-speaking inmates with limited, moderate or no English proficiency constituted a significant percentage of Gouverneur’s population. The facility offers an English as a Second Language (ESL) course, which at the time of our visit contained approximately 51 students. However, educational and vocational courses are taught in English only, with limited materials available in Spanish. While staff reports that inmate translators are generally effective, we found at our visit that the language barrier can pose significant challenges in program settings. When we spoke with staff in December 2008, they explained that hiring Spanish-speaking staff is a DOCS priority, though it has been a challenge for the facility as there are not many Spanish-speaking residents in its geographical location. We urge the prison to continue its efforts to hire Spanish-speaking staff and increase Spanish-language materials available to inmates.

Academic Program

At the time of our visit, 247 inmates were enrolled in one of Gouverneur’s educational programs. Gouverneur’s academic courses include Adult Basic Education (ABE), Pre-General Equivalency Diploma (Pre-GED), GED, and English as a Second Language (ESL). There were no ABE or GED courses specifically geared towards Spanish speakers. At the time of our visit, there were no vacancies in Gouverneur’s academic staff of nine. In our December 2008 conversation with staff, we learned that the Academic Supervisor position, which was vacated in the fall when the staff person retired, had just been filled. All classes were nearly full, with the exception of the GED course, which had only 17 students and a capacity to enroll thirty-four.

We toured several classrooms, including the computer lab. The classrooms were clean and decorated with maps and posters. The computers were not new, but were in working order and the instructor reported no problems with them. Class sizes are relatively small, with between 17 and 20 students per class. The academic programs normally run throughout the summer, provided there are enough funds. There were 10 Inmate Program Assistants (IPAs) working in the academic classes.

In 2007, 42 inmates received their GED, representing a 59% GED passing rate, which is lower than the statewide average of seventy-one percent. There is no higher education offered at the facility. As 48% of the inmate population has earned a high school diploma or GED, an opportunity for higher education would be beneficial, particularly given that postsecondary education fosters a more manageable prison environment and is proven to reduce recidivism. Seventy percent of inmates we surveyed were satisfied with their educational program, at least some of the time, a rate higher than at most other prisons we have visited. However, many inmates expressed concern that classes, particularly the ABE class, are cancelled too frequently.

Vocational Program

At the time of our visit, a total of 358 inmates at Gouverneur were enrolled in one of eight vocational programs: building maintenance, custodial maintenance, electrical trades, floor covering, general business, horticulture, masonry and welding. There are currently 11 instructors, with no vacancies or instructors on leave. We found the vocational programs at Gouverneur to be well-equipped and the instructors dedicated to providing inmates with work skills.

Many inmates spoke favorably of their programs and instructors. Fifty-nine percent of the inmates we surveyed were satisfied with their vocational program, and 73% were at least somewhat satisfied, rates higher than at most other prisons we have visited. A number of inmates commented to us that they enjoy the custodial maintenance and general business classes.

Libraries

Members of the Visiting Committee inspected the library and spoke with the facility's librarian, who has been working at Gouverneur since 1992. The library is open daytime hours during weekdays, some evenings, Saturdays, and one Sunday per month.

The collection included a variety of printed and electronic materials, including a section specific to alcoholism and substance addiction recovery. Inmates, as well as staff, can watch movies inside the library using headphones, and up to six people can watch a film together. The library participates in an interlibrary loan system and also makes an effort to ensure that inmates in the S-Block and SHU have access to books.

We were unable to visit the law library, which is open from 3:00 pm to 10:00 pm Monday through Friday. The level of inmate satisfaction with the libraries at Gouverneur was high. Seventy-nine percent of inmates surveyed were at least somewhat satisfied with the general library, and 79% were also at least somewhat satisfied with the law library.

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

Visiting Committee members toured the visiting room at the facility. We were pleased to see a section designated for children, with a TV, vending machines, painted mural and toys. However, only 53% of inmates were satisfied with the visiting program at least some of the time. Many inmates complained of visits being prematurely cut short due to a lack of space.

Sixty-seven percent of inmates were dissatisfied with the mail and package programs, and the same percentage reported problems receiving their mail and/or packages. The complaints involved such concerns as individuals being given the wrong packages, perishable items spoiling, and mail collection occurring at a late hour. The commissary, as in other prisons, is a source of discontent, with 81% of inmates being dissatisfied, mainly with the rising prices. Additionally, 77% of inmates at Gouverneur are dissatisfied with the food at the facility.

Safety and Violence

Inmate-Staff Relations

Staff described the level of violence at Gouverneur as very low and the atmosphere as generally calm, which they attribute to their strict adherence to DOCS rules and regulations. Most inmates with whom we spoke described a high level of tension with the staff, though a relatively low level of physical confrontations in the prison, both between staff and inmates and among inmates.

Fifty-one percent of inmates we surveyed rated inmate-officer relations as very bad; an additional 19% characterized them as somewhat bad, with only 5.6% describing them as somewhat good. In addition, 72% of those surveyed felt that inmate-officer relations were worse at Gouverneur than at other facilities where they have been incarcerated, with only 6% describing them as better. These rates reflect a somewhat worse perception of inmate-staff relations than at other medium security prisons we have visited.

Inmates reported low rates of physical confrontation with staff compared to other prisons we have visited. Eighty-nine percent of the inmates we surveyed said they never experienced a physical confrontation with an officer at Gouverneur, and only 35% of respondents said that physical confrontations were common throughout the facility. Twenty-three percent felt the level of staff-inmate physical confrontations was lower at Gouverneur compared to other facilities where they have been; 42% felt it was about the same; and about 34% felt it was higher at Gouverneur. Unlike at other facilities we have visited, few inmates reported they had experienced an abusive pat frisk, with only 25% of those we surveyed saying abusive pat frisks were common throughout the prison. Inmates generally stated that most physical confrontations between inmates and staff occur en route to the S-Block or SHU or in the mess hall.

Inmates described verbal harassment at Gouverneur as more prevalent than physical confrontations with staff. Seventy-six percent of survey participants said they experienced

verbal harassment from staff while at Gouverneur, with 56% stating they experienced this harassment frequently. These rates are somewhat worse than the rates we have obtained from several other medium security facilities we have visited. Similar to what we have heard at other prisons, 81% of respondents said that verbal harassment occurs frequently throughout the prison. Overall, 58% of the surveyed inmates reported the overall level of staff abuse at Gouverneur as much worse or somewhat worse than at other facilities where they had been incarcerated. At rates comparable to other facilities we have visited, 73% of respondents felt there were COs who engage in serious misconduct, and 92% also believed there were professional and respectful COs working at Gouverneur. The inmates surveyed estimated that 30% of the COs do a good job and that 50% engage in misconduct.

At a rate comparable to other prisons we have visited, 46% of the survey respondents reported frequently feeling unsafe while at Gouverneur. When asked to describe how unsafe they felt, inmates reported rates consistent with other prisons we have visited, with 46% saying they felt very unsafe, 36.8% saying they felt somewhat unsafe, and 17.2% saying they felt only a little unsafe.

We reviewed DOCS computer records concerning inmate disciplinary data and Unusual Incident Reports (UIR) for the period January 2003 through August 2006 for Gouverneur, excluding incidents from Gouverneur's S-Block, and compared it to system-wide data for assault on staff incidents. The inmate discipline data places Gouverneur in the middle of medium and minimum security prisons in terms of the rate of tickets issued for assaults on staff. Similarly, the prisons' UIR rate for assaults on staff is also approximately in the middle of all medium and minimum security facilities. DOCS 2006 Inmate Grievance Program Annual Report indicates that there were only two assault-on-staff UIRs for all of 2006, including any that may have occurred in the S-Block, suggesting a reduction from the previous year. These data appear to confirm the impressions of staff and inmates that there is less violence between inmates and staff than at many other facilities.

Inmate-Inmate Relations

According to both staff and inmates, physical confrontations between inmates occur less frequently at Gouverneur than at other prisons we have visited. Only 27% of inmates we surveyed reported having been in a physical confrontation with another inmate while at Gouverneur, and only 20% said that such confrontations occur frequently in the prison. Many inmates attributed the lower levels of inmate violence to the fact that many inmates at Gouverneur are close to their release date, and so are less inclined to engage in behavior that might jeopardize their release. Staff members believed that the low level of idleness at the prison reduced tension among inmates.

Seventy-one percent of inmates we surveyed felt that the level of inmate fighting at Gouverneur is lower than at other facilities where they had been incarcerated. Survey respondents also rated the level of gang activity as lower than at other prisons where they were incarcerated, with 67% of respondents rating the level of gang activity lower than at other prisons and 55% rating the level of drug use lower than at other prisons. Staff told us that while drug activity occurs periodically, it is not a significant source of violence at the prison.

We also reviewed DOCS computer data on inmate disciplinary actions and Unusual Incident Reports (UIR) for assault-on-inmate and fighting incidents at Gouverneur, excluding data for its S-Block, for the period January through August 2006. Gouverneur's rate for assault-on-inmate misbehavior reports was in the top quarter and the rate for fighting tickets was in the top 40% of all medium and minimum security prisons. However, most of these incidents occurred in 2003 and 2004, and there were fewer in 2005 and none reported during January to August 2006 period. The rate of UIR incidents from DOCS computer records for assault-on-inmates at Gouverneur place it in the top 40% of medium and minimum security prisons. As we have found with other prisons and contrary to DOCS policy, the UIR data does not reflect all misbehavior reports for assault-on-inmate incidents. DOCS 2006 Inmate Grievance Program Annual Report indicates that there were five assault-on-inmate UIRs for 2006, including any that may have occurred in the S-Block, suggesting a higher number of such UIRs than in the previous four years. These data revealed a potentially more serious situation than the staff and inmates reported. We will seek 2007 and 2008 disciplinary and UIR data to determine if the prison has experienced less inmate violence during the past two years.

Medical and Dental Services

Medical Care

The Visiting Committee toured the medical area and spoke with the Nurse Administrator, who was very cooperative in providing information about healthcare services. The medical area is similar to medical units in other prisons built in the "cookie cutter" model: a ten-bed infirmary, a wing containing multiple examination rooms and staff offices, a waiting area immediately inside the entry door and a small wing containing the dental area. We found the medical area clean and well maintained.

In our survey of inmates about medical care at the prison, the respondents expressed concerns about both access to, and the quality of, healthcare at rates that are about average for other prisons we have visited. Overall, only 10% of the survey participants rated medical care as good, 47% said it was fair and 43% reported it as poor.

The medical staff consists of: a Nurse Administrator, one full-time physician position, currently filled by two half-time doctors, 11 full-time nurse II positions and a pharmacist. In addition to the two half-time doctors, the prison employs three extra-service physicians who as a group work at the prison for approximately 10 hours per week. With the extra service physician staff, the prison has only 1.25 doctors for approximately 1,050 inmates, representing a clinic staff-inmate ratio of one provider for every 840 inmates. This rate is more than double the average rate for the Department of one clinic provider for every 400 inmates, and the Department should promptly access whether additional physician staff is necessary. At the time of our visit, there was one nurse vacancy, which had been unfilled for nearly two months. We were informed by the medical staff that the prison was awaiting formal approval to fill the position and that there was a good pool of potential applicants in the area. The Nurse Administrator had told us that the prison used only a few shifts of overtime each week and relied on per diem nurses and sometimes nurses provided through a nursing agency that contracts with the Department to fill in for nurses who are absent. When we spoke with staff in December 2008, all positions had been filled.

Sick call is conducted five times per week by a single nurse who sees approximately 20 patients per day early each weekday morning. This utilization of sick call services is somewhat below the levels reported at other prisons. Inmates who attend sick call and are not seen before the 7:00 am inmate count are required to return to their housing area and come back to the clinic after the count is cleared. In our December 2008 conversation, staff told us that over a 30-day period they reviewed the number of inmates affected by this process and found that only one inmate had to return to sick call after the count was cleared. However, medical staff noted that on Mondays the number of inmates who request sick call in the morning frequently exceed the number of inmates who could be seen before the morning count. For this reason, the facility often calls some inmates to sick call after the count. This inefficient process can result in discouraging inmates from getting needed care. Fifty-six percent of the survey respondents said they could access sick call when they need it, 24% said they have such access only sometimes and 19% reported that they did not have access when needed. These figures are slightly worse than the averages for other prisons we have visited. Given the small number of inmates who cannot be seen at sick call prior to the facility count, we urge the facility to consider allowing inmates in the sick call waiting area at count time to remain in the medical unit on those few occasions when sick call cannot be completed by 7:00 am.

When asked inmates to rate the quality of the sick call services, 18% rated them as good, 42% said they were fair and 41% reported them as poor. Although these figures are comparable to those from inmates at other prisons, they still represent significant dissatisfaction with sick call services. A few survey participants complimented the nursing staff for their care, saying some nurses are responsive to inmates' concerns. However, many more survey respondents complained that some nurses are dismissive of their complaints, that they provide only over-the-counter analgesics for most problems and that they delay, or are reluctant to make, referrals to physicians for follow-up care, even when the patient presents serious medical problems. There were also several complaints about the security staff in the medical area harassing inmates.

Inmates who experience a medical emergency or serious medical problems after sick call hours can alert their housing officer of their need for immediate medical attention. They then may be seen by medical staff for emergency sick call (ESC). The medical staff informed us that, in their opinion, some inmates abuse this process and request immediate attention when their medical situation is not an emergency. In response to these non-emergent situations, the medical staff can issue a misbehavior report to the inmate who improperly requested ESC. Staff told us that the issuance of these disciplinary tickets occurs on a limited basis at the prison. It is problematic that medical staff initiates disciplinary action in response to requests for medical attention. It is difficult for inmates to determine whether a medical problem is a true emergency and disciplining inmates for seeking care both undermines the provider-patient relationship and can inappropriately deter other inmates from seeking care when they are in need of immediate attention.

We were informed that approximately 80-100 inmates are seen each week in the clinic by the physicians during clinic call-outs. Each of the half-time doctors sees about 30 inmates per week, and the rest of the patients are seen by the extra service physicians. The staff estimated that it takes two to three weeks to see a doctor for non-urgent matters. In response to our surveys, the inmate participants also reported delays of three weeks or more to see a doctor. Forty-six percent of the respondents said they frequently experience delays seeing the prison

physicians, a rate higher than the average of 37% reported by inmates at the prisons we have visited.

The survey participants were also critical of the quality of care they received from the doctors. Only 10% of the survey participants rated the care provided by the physicians as good and 46% said it was poor. These rates are even worse for those respondents who said they frequently see a physician – only 8% rated the care as good and 54% reported it as poor. The comments by the survey participants detail several complaints about lack of concern by the doctors for inmates' conditions, inadequate follow-up to serious medical problems and the provision of pain medication rather than treatment for chronic conditions.

The medical department reported that there are 28 known HIV-infected inmates, only 14 of whom are on treatment. The number of known HIV patients represents only 2.66% of Gouverneur's population, whereas the estimated HIV-infection rate for the Department is more than double that rate. During our conversation with the facility staff in December 2008, we learned that at orientation the Superintendent personally encourages inmates to get tested for HIV. Presentations on HIV-related issues are also made to the inmate population by Northern Regional Center for Individual Living and Planned Parenthood. In addition to these worthwhile efforts, we urge the prison medical staff to make greater efforts to identify more HIV-infected inmates.

The CA received data about infectious disease (IFD) appointments for Fiscal Year 2006-07 for all state prisons. Gouverneur had far fewer IFD appointments than the system-wide average, a rate that is nearly one-tenth the Department-wide rate. We learned during our visit, however, that one of the extra-service physicians now employed by the facility has HIV expertise and sees HIV-infected inmates during his 2.5 hours at the prison each week. We are not in a position to assess the specific HIV care being provided, but based upon the data we received from the prison and the Department, we are concerned that the medical staff (a) may not be aggressively treating HIV-infected inmates and (b) may not be referring patients who are not responding adequately to therapy to an infectious disease specialist for evaluation. We urge DOCS Division of Health Services to carefully scrutinize the HIV Continuous Quality Improvement surveys and the medical records of HIV-infected inmates to assess whether these patients are receiving optimal care.

The prison reported to us that there were 108 Gouverneur inmates infected with Hepatitis C (HCV), but only two inmates were on HCV therapy. The rate of identified HCV-infected inmates within the prison is above the Department-wide average, suggesting that the medical staff is successful in convincing the HCV-infected population to seek testing. Although not all HCV-infected inmates are eligible for treatment, the prison's HCV treatment rate of 2% of its known HCV population is below the system-wide average of five percent. In response to our questions about low HCV treatment rates, the medical staff estimated that 30% of the HCV-infected inmates who are offered therapy decline it. The prison also informed us that they have 19 inmates who are co-infected with HIV and HCV and none of these patients were on only HCV therapy. We question whether the medical staff is aggressively pursuing treatment for their HCV-infected patients and/or adequately encouraging patients to initiate therapy.

The prison also has many patients with other chronic illnesses, including 143 asthmatic inmates of which 75 were on treatment; 92 inmates with hypertension, of which 90 were on treatment; and 37 diabetics, all of whom were on treatment. These patients have significant medical needs and the concern is whether the prison has adequate clinic staff to properly monitor and treat all the inmates with serious and/or chronic medical problems.

The medical staff also informed us that it has experienced a few cases of MRSA, Methicillin-resistant Staphylococcus Aureus, a bacterial infection that can be difficult to treat and that has raised concerns in the prison population. The staff described to the Visiting Committee that they have enhanced their cleaning procedures in response to this outbreak and have instituted an education program for the inmates about this condition.

Based upon our analysis of specialty care services for all state prisons, we determined that Gouverneur utilized overall specialty services at a rate that is only 60% of the Department-wide rate during Fiscal Year 2006-07. The prison had very low utilization rate of the following specialty services: cardiology (38% of system-wide rates); gastroenterology (34%); nephrology (18%); neurology (25%) and physical therapy (27%). The medical staff admitted that they have experienced some difficulties in getting neurosurgery services. There is nothing about the Gouverneur patient population that would suggest that inmates at this prison would have fewer needs for specialist care services than inmates at other prisons. We believe the Department should investigate this situation and determine whether the prison medical staff are underutilizing specialty care services and/or whether there are inadequate specialty resources available in this region of the state.

The inmate responses to our survey reinforced our concerns about specialty care for this prison population. Sixty-four percent of the respondents said they experienced delays, at least some of the time, in access to specialists. For those respondents who had been to a specialist in the last two years, they estimated the median delay for such access to be two and one-half months. Sixty percent of the survey participants said there was inadequate follow-up to the specialists' recommendations.

The prison has only one pharmacist and no pharmacy aide for its population. Compared to other prisons we have visited, this staffing appears inadequate for a prison of this size. Nearly half the survey respondents who were taking medication said they experienced problems getting their prescriptions at least some of the time.

Gouverneur has a facility-based quality improvement committee that meets quarterly. During these meetings, they attempt to identify areas to improve. We were told that the prison CQI committee does not perform chart reviews as part of its evaluation of medical services, an omission that should be addressed since random chart reviews are an excellent aide in identifying potential deficiencies in care. However, we were interested to learn that senior medical staff in the hub perform one-day medical audit of prisons other than where they work to perform an inspection of the medical area and a review of medical charts. We reviewed the form used during these audits. The audit assesses 22 aspects of the healthcare operation, including review of policies and procedures, compliance with Department of Health mandates and other agency regulations, infection control, medical documentation and quality improvement measures. During these audits, although the review team inspects medical records, they do not speak with

inmates about the healthcare they are receiving. We commend the medical staff in this hub for undertaking these audits, and we urge other hubs to develop a similar process. We believe the audit instrument could be augmented to include more detailed review of chronic care and specialty care services, and the audit process should include some contact with the patients being served. We were also informed that DOCS Chief Medical Officer Dr. Lester Wright visits the prison once or twice a year.

There are clearly problems with the medical care at the prison. We urge DOCS' Division of Health Services to review the staffing allocation at the prison and to determine (1) whether inmates are receiving timely access to, and comprehensive care during, routine medical encounters (sick call and clinic call-out); (2) whether patients are getting timely and appropriate access to specialty care; and (3) whether the prison providers are following up on serious medical conditions and specialists' recommendations.

Dental Care

The prison has inadequate dental services to meet the needs of its population. At the time of our visit, the dentist at Gouverneur had been on military leave for four years, and he has requested a leave extension. The facility has been unable to secure another dentist for a temporary dental item. Dentists from nearby Watertown C.F. have been visiting the facility to conduct dental care, and, according to staff estimates, cover approximately 60% of a full-time position. The hygienist and assistant positions are filled. Staff informed us that the dentists perform extractions rather than restorations, a complaint we frequently heard from inmates. Additionally, mainly due to the dentist vacancy, the wait for routine cleaning is three months and for dentures is five to seven months, as the dentists have to spend about 75% of their time on emergencies.

In December 2008, staff informed us that the dentist position remained vacant. In order to fill the temporary dental position, we believe it will be necessary for the Department to seek an increase in the authorized salary for the position from the governor's office and appropriate state agencies to ensure that inmates at Gouverneur receive proper dental care. In addition, we encourage the Gouverneur administration to continue actively recruiting a new dentist.

Transitional Services

The Visiting Committee observed classes and spoke with prison staff as well as Inmate Program Assistants (IPAs) for the Transitional Services (TS) activities at Gouverneur. Phase One is a two-week, full-day module orientation program with three IPAs designed to introduce inmates to the rules and regulations of Gouverneur. Phase Three is a five-week, half-day module program for inmates nearing discharge. It focuses on the rules of parole, employment skills, creating a resume, learning about job interviews, and obtaining letters of assurance needed for parole. Staff told us that most participants are within three to four months of their earliest release date. The Phase Three class we observed contained 21 inmates. There were no materials available in Spanish, and the IPAs said they could use more up-to-date information about programs in the community. The TS staff estimated that approximately 30% of Phase Three participants send inquiries to substance abuse programs, but many of these programs are no longer operating and only 10% of the inmates receive favorable responses. The staff also stated

that of those inmates who write programs for housing, about 25% get a response. Staff said that the TS program does not assist participants in writing letters to potential employers. In December 2008, staff informed us that the facility is about to obtain access to computerized data maintained by the Department of updated information on employment and other reentry resources in the community. We learned during our conversation with staff in December 2008 that the Northern Regional Center on Independent Living and Planned Parenthood make presentations to TS participants and provide information about housing and health issues. We also learned that DOCS educational staff in New York City arranges teleconference meetings of formerly incarcerated individuals and agencies and employers in the City to discuss employment opportunities and resources to assist the inmates when they return home. Information about this service is provided to inmates before they leave Gouverneur. We commend the Department for making efforts to expand access to information about community-based resources.

The prison also conducts Aggression Replacement Training (ART) classes. ART is an eight-week, half-day program that, at the time of our visit, was facilitated by two IPAs and contained 22 participants. We were told that anyone who needs the program will get it and that enrollment is provided earlier in an inmate's incarceration, rather than waiting to the end of his sentence.

Grievance Program

Gouverneur inmates filed a total of 719 grievances in 2007, a 20% decrease from 2006, when they filed 903 grievances. The most highly grieved areas for both 2006 and 2007 were Medical and Dental, S-Block, and Staff Conduct, with an increase in staff conduct grievances from 16% to 21% from 2006 to 2007. Gouverneur has an exceptionally high rate of grievances filed per inmate, with 870.7 grievances filed per 1000 inmates in 2006, the highest rate in its hub, compared to 372.3 at Cape Vincent, 597.9 at Riverview, and 142 at Ogdensburg. The Inmate Grievance Program Supervisor at Gouverneur attributed the high rate mainly to inmates being comfortable filing grievances.

Despite the high level of grievances filed, confidence in the grievance system among inmates we surveyed at Gouverneur was very low, with many inmates reporting they feared retaliation from staff for complaining. Of the surveyed inmates, 40.6% had used the grievance system, with 26% of respondents reporting they frequently experienced retaliation for doing so. Seventy-six percent of the survey participants rated the system as poor and only 11% rated it as good. Sixty-nine percent of respondents felt the grievance system at Gouverneur was worse than at other facilities, with only 6% describing it as better.

S-Block

The Visiting Committee toured Gouverneur's S-Block 200, which at the time of our visit held 197 inmates. We received 38 surveys from inmates whose median time in this S-Block was 1.6 months.

Seventy S-Block inmates are currently enrolled in an educational cell-study program, which is not offered in Spanish. Of the survey respondents, 57% were dissatisfied with the cell-study program in the S-Block. Most respondents were at least somewhat satisfied with their

access to law library materials, and 46% were at least somewhat satisfied with their access to general reading materials, a lower rate than at other S-Blocks we have visited. Staff reported that 200-book carts are changed every eight months in the S-Block. Staff explained that if S-Block inmates access books or the cell-study program, security staff will consider this as a positive initiative when they assess whether to reduce inmates' disciplinary housing sentences. Seventy-four percent of the inmates surveyed in S-Block were dissatisfied with the food, with many inmates complaining of very small sized portions.

Many inmates surveyed go only once in a while to their one hour of recreation. Several inmates said they do not go out because there is little to do during the hour. Permitting inmates to go to recreation in pairs and providing them with physical equipment like chin-up bars or balls could provide an incentive for inmates who otherwise spend 24 hours a day in their cells.

At the time of our visit, no inmates were on deprivation orders, restricted diets, or cell shield orders. We commend the facility for reducing their restricted diets from 49 in 2006 to two in 2008. Staff attributed this reduction to an increased effort to negotiate with inmates before placing them on restricted diets. Consistent with other S-Blocks we have visited, only 13% of respondents rated relations with COs as good, with 54% saying they frequently felt unsafe. Eighty-seven percent of the respondents reported never having a physical confrontation with COs in the S-Block, a rate lower than at other S-Blocks. However, survey participants reported high rates of verbal harassment from staff, with 84% of respondents having experienced it at least once. Several inmates said that the verbal harassment included racially charged comments.

At the time of our visit, the prison reported that there were a total of 46 inmates on the mental health case load. Forty-five of these inmates were housed in the S-Block, and the remaining inmate was confined in the facility's SHU. Of the S-Block inmates surveyed, 68% rated mental health services as poor, and only 4% rated the services as good. Placing inmates with severe mental illness in 23-hour segregation can lead to psychiatric deterioration and increased disciplinary problems. Recent legislation, known as the SHU Bill, and settlement of litigation against DOCS, both requiring the operation of residential treatment programs for inmates in disciplinary confinement with severe mental illness, should necessitate greater mental health services for S-Block inmates and eventually will prevent people with these conditions from being placed in disciplinary confinement. Such a step will also serve to alleviate the burden on prisons of repeatedly initiating disciplinary action against those with severe mental illness.

Inmates in Gouverneur's S-Block filed 323 grievances in 2007 compared to 498 in 2006. The IGP supervisors told us that the number of grievances from the S-Block varies depending on the attitude of the inmates in the facility at any given time. Sixty-four percent of S-Block inmates rated the grievance system's effectiveness as poor.

Special Housing Unit (SHU)

The Visiting Committee also toured Gouverneur's 32 inmate capacity Special Housing Unit which, at the time of our visit, held 21 inmates. We received completed surveys from six of the inmates regarding conditions, services and programs inside the SHU.

Nearly all the inmates whom we interviewed described inmate-officer relations as bad. Few of the respondents said that they had experienced a physical confrontation with a staff member. However, all said that verbal harassment from staff was common in the SHU, with most respondents saying they had personally experienced it. Additionally, all inmates we surveyed reported feeling unsafe while in the SHU. None of the respondents had ever experienced an inmate-inmate conflict while in the SHU at Gouverneur.

All the inmates surveyed were at least somewhat satisfied with their access to law library materials and nearly all were at least somewhat satisfied with mail services in the SHU. Staff reported that the 200-book cart is changed every two months in the SHU, and the magazine cart is circulated through the SHU three times per week. However, half of survey respondents reported being denied recreation while in the SHU, in apparent violation of DOCS regulations and state law which require the Department to offer daily exercise.

Meeting with Staff

Visiting Committee members met with representatives of each staff union, and we appreciated the informative conversation. They reported that security and civilian staff work together respectfully at Gouverneur. Staff believed that the high number of programmed inmates leads to a decrease in violence, as did the addition of the S-Block.

The union representatives were concerned about the low levels of staff compared to the size of the facility and described a conflict with the administration centering on the desire for a staffing increase. The union representatives felt there are too few security officers and that the impending retirement of many COs poses a significant problem. Additionally, they said that the nursing staff are underpaid and that the reduction of teacher items from 11 to 9 creates problems in the classrooms.

Final Telephone Debriefing with Executive Team

In lieu of our usual final meeting with the Executive Team, we conducted a telephone conference call following our visit to discuss our initial observations. We mentioned our positive impressions of the vocational programs and the apparent low level of inmate violence and gang activity. We noted the reduction in the number of restricted diets in the S-Block and efforts to negotiate with disagreeable inmates rather than quickly restricting their diets.

We discussed our concerns about the medical and dental services at Gouverneur, in particular the long-term absence of a dentist, as well as the high extraction rate. Additionally, we mentioned that we heard a high number of complains regarding sick call and delays in seeing physicians. We also discussed the challenges presented by the relatively high number of Spanish-speaking inmates in the prison, and described the AT&T medical translation service provided by DOCS that the facility staff and inmates could use. In regards to the disciplinary and grievance systems, we shared our view that the rate of dismissals of the most serious category of disciplinary incidents was surprisingly low.

Recommendations

Academic and Vocational Program

- Initiate additional vocational programs that more closely reflect job opportunities in the community.
- Increase Spanish-language materials in academic and vocational programs.

Packages and Mail

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

Safety

- 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.

Medical Care

- Fill the vacant nursing position.
- Perform a needs assessment for physician services and consider expanding clinic provider services for the prison.
- Review the quality of the sick call encounters and ensure that all sick call nurses adequately address inmates' medical needs.
- Modify the sick call procedure to eliminate and/or substantially reduce the need for inmates to travel to the clinic area twice in the morning to be seen by a sick call nurse.
- Review the quality of medical encounters between Gouverneur inmates and clinic providers to ensure that inmates' medical conditions are promptly diagnosed and properly treated.
- Increase educational and other outreach efforts concerning HIV, including more peer education programs, to encourage more inmates to be tested for HIV and those who are infected to seek care from the medical staff.
- Re-evaluate inmates with Hepatitis C to determine if more patients may be appropriate candidates for treatment.
- Review complaints concerning access to medications and develop a corrective plan if systemic deficiencies are identified.
- 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 recommendations made by the specialists.

- Conduct regular meetings among the Inmate Liaison Committee, the Inmate Grievance Resolution Committee and the medical staff to discuss inmates' concerns with healthcare.

Dental Care

- Hire a full-time replacement dentist for the vacant prison dentist position. If such a replacement is not immediately available, provide dental care through a contract with an outside dental service.
- Identify and hire additional temporary dental services to eliminate the backlog in care.
- Perform a needs assessment to determine the level of prison dental services required and consider expanding the number of permanent dental positions allocated to the prison.
- Review the protocols for determining whether to perform an extraction as opposed to restorative work to assess whether reasonable efforts are being made to avoid unnecessary extractions.

Transitional Services

- Enhance efforts to get up-to-date materials about programs, housing and employment opportunities in the community.
- Prepare more Transitional Services materials in Spanish and seek materials in Spanish about community opportunities for inmates with limited-English skills.

S-Block and Special Housing Unit

- Ensure SHU and S-Block inmates have regular access to library materials and that materials are frequently rotated.
- Install cameras in the SHU and S-Block.
- Institute a system-wide policy to provide inmates in SHUs throughout the state with athletic equipment like balls or chin-up bars when they go to recreation.

Staff Concerns

- The Executive and the Legislature should institute system-wide incentives for security staff to remain on the job for longer than 25 years.