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## MEMBERS OF THE Board IN ATTENDANCE :

Judge Elliot Howsie
Judge Beth Lazzara
Bethany Hallam for Councilman Catena
Stephen Pilarski for County Executive
Richard Fitzgerald
Controller Corey O'Connor
Sheriff Kevin Kraus
Terri Klein

JAIL ADMINISTRATION IN ATTENDANCE:
Warden Orlando Harper
Chief Deputy Warden Jason Beasom
HSA Dr. Ashley Brinkman
Deputy Warden of Administrative Operations and
Employee Development Blythe Toma

Erin Dalton, Department of Human Services
Kevin Kordzi - Passages to Recover
Frank DeClair - The Renewal Center
Steve Esswein - Electronic Monitoring


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## WELCOME, CALL TO ORDER AND RULES

JUDGE HOWSIE: I hope everyone had an enjoyable holiday, Thanksgiving, so welcome to the JOB meeting, The Jail Oversight Board Meeting. I'd like to call the meeting to order.

If anyone did not have an opportunity to sign the sign-in sheet, we'd ask that you do that if you intend to speak. If you're not on the sheet, you will not be able to speak. So please make sure you've taken the opportunity to sign the sheet.

All right. So with that being said, let's talk about the rules. So we would like that everyone extend the same courtesy, respect to anyone else that you would want for yourself. If parties are speaking, please do not interrupt, overtalk. We won't tolerate -- we will not tolerate any profanity, vulgar language or disrespectful language. We want everyone to be heard, so please, you know, take the opportunity to speak and say whatever you need to say, but we'd ask that you do it in a respectful manner.

And public comments are limited to
three minutes per person.
With that being said, let's do the
roll.
Judge Lazzara?
JUDGE LAZZARA: Present.
JUDGE HOWSIE: Terri Klein?
MS. KLEIN: Present.
JUDGE HOWSIE: County Executive
Rich Fitzgerald?
MR. PILARSKI: Steve Pilarski for
Fitzgerald.
JUDGE HOWSIE: Sheriff Kraus?
SHERIFF KRAUS: Present.
JUDGE HOWSIE: Gail Moss?
MS. MOSS: (No response.)
JUDGE HOWSIE: Abas Kamara?
MR. KAMARA: (No response.)
JUDGE HOWSIE: Pat Catena?
MS. HALLAM: Bethany Hallam.
JUDGE HOWSIE: And Controller Corey
O'Connor. I believe he is on his way.
CONTROLLER O'CONNOR: I'm here.
JUDGE HOWSIE: Oh, he's on the
phone, okay.
CONTROLLER O'CONNOR: I'm on the
phone. I'll make it a little bit later, but I won't be at the meeting, but I'm listening right now. Thank you.

JUDGE HOWSIE: So he is here. So with that being said --

MS. HALLAM: Point of order.
JUDGE HOWSIE: Yes.
MS. HALLAM: Yeah. I would like to, for the record, note that Mr. Pilarski is attending illegally. There's no designee for the County Executive allowed per statute.

JUDGE HOWSIE: Thank you very much. MS. HALLAM: Uh-huh.

JUDGE HOWSIE: With that being said, we'll now have the Community Corrections Report. Passages to Recovery? MR. KORDZI: Good evening. Kevin Kordzi with Passages to Recovery. Currently, we have 21 men and 11 women in the program. That's the residential program. We have 8 men and 2 women in our transitional living program. We've had 7 admissions for the month of November. Five clients moved from residential to TLF, to transitional living, and eight clients were successfully discharged completely from the program.

Continuing to have GED classes through Goodwill and also Pittsburgh Literacy. And continuing to do community passes for family visits and community kind of activities, and also in-house visits also.

And I think that is pretty much about it.

JUDGE HOWSIE: Any questions?
(No response.)
JUDGE HOWSIE: Thank you very much, sir.

All right. Renewal Center?
MR. DeCLAIR: Frank DeClair reporting for Renewal Incorporated. I'd just like to report on Thanksgiving Day we had 20 reentrants volunteer at the 32 nd Annual Turkey Trot. Each of those volunteers volunteered for five hours of community service on that day.

Next week we'll have several staff members participating in an informational seminar facilitated by the ACJ and DHS on the expansion of the MAT program inside the jail.

Our November employment percentage was 76 percent of employable reentrants averaging $\$ 13.37$ per hour.

COVID numbers, we did have two positive staff members test positive in November. No major symptoms. No hospitalizations. We had zero reentrants who tested positive in November.

JUDGE HOWSIE: Thank you.
Any questions?
Yes, ma'am. Terri Klein.
MS. KLEIN: I was just looking at the information we have about drug and alcohol services and mental health, and it says five and two, and I assume those are separate individuals that are five? I mean, it just seems low to me, and $I$ was just wondering if you could comment on that.

MR. DeCLAIR: What is the specific? I believe we currently have 12 reentrants in in-patient drug and alcohol.

I have to -- I'm not positive what those numbers indicate. We do --

MS. KLEIN: Additional service referrals made to outside agencies.

MR. DeCLAIR: So that would be our outpatient drug and alcohol and mental health services. So this is probably new referrals for
the month of November. I will double-check on the accuracy of that information and I'll let you know.

JUDGE LAZZARA: Yeah, but that's not the total number of people that are involved in drug and alcohol treatment.

MR. Declair: Correct. Correct.
MS. KLEIN: That is not?
JUDGE LAZZARA: No, because --
because I mean, most of the folks that we send there are doing drug and alcohol and mental health.

MR. Declair: Yes.
JUDGE LAZZARA: And so that may be the new number of people every month but it's certainly not indicative of the total number that are doing that.

MR. DecLAIR: Correct.
JUDGE HOWSIE: Any questions, additional questions?

Yes, Ms. Hallam.
MS. HALLAM: Yeah. So this is kind of $I$ guess addressed to Passages as well, but I know we've been talking a lot about deaths in the Allegheny County Jail, and I'm just wondering if
you know off the top of your head when was the
last time someone died in either -- any of the
alternative housing facilities?
MR. DeCLAIR: I can't recall a
county reentrant -- the last time a county
reentrant died in our facility.
MS. HALLAM: Yeah. And how long
have you been there?
MR. DeCLAIR: 21 years.
MS. HALLAM: Okay. So to your
knowledge, in 21 years, no one has died?
MR. DeCLAIR: County reentrants,
not that $I$ can remember.
MS. HALLAM: Okay.
MR. DeCLAIR: I'm not saying that
it did not happen, but -- yeah.
MS. HALLAM: I know you. I feel
like you would remember, so thank you very much.
MR. DeCLAIR: All right.
JUDGE HOWSIE: Thank you very much,
sir.
MR. DeCLAIR: Thank you.
JUDGE HOWSIE: Electronic
monitoring?
MR. ESSWEIN: Good evening, Board.

JUDGE HOWSIE: Good evening.

MR. ESSWEIN: Steve Esswein for the Probation Office. Nothing new to report outside of the report that we have. Just some highlights. We have 646 individuals on the bracelet; 93 of those successfully completed during that reporting period. JUDGE HOWSIE: Any questions? Judge Lazzara?

MR. ESSWEIN: Judge Lazzara, the SL-2s have been ordered, so it's in --

JUDGE LAZZARA: When are we going to get them?

MR. ESSWEIN: I hope in three weeks. I'm hoping. Fingers crossed. JUDGE LAZZARA: Okay. That's always going to be my question. That's for the --

MS. HALLAM: Is that the alcohol thing?

MR. ESSWEIN: Breath.
JUDGE LAZZARA: It's more of a
breath thing than it is a band around your ankle, and so it's cheaper and it's effective and it works really well. And we would love them.

MR. ESSWEIN: As soon as I can get a purchase order number from fiscal, I'll get a couple. I know they're holding them for me so...

MS. HALLAM: Can you tell me a
little bit more about it, because $I$ have seen before the bracelets that are alcohol monitors. That's what $I$ thought that we were talking about on the previous meetings. Is this different?

JUDGE LAZZARA: Yeah, this is different.

MR. ESSWEIN: It's a portable breath tester. It's a PBT, but what it does, it takes a picture of the individual who is taking the test and then sends a GPS location of where that test was taken.

MS. HALLAM: And it like pings when you need to take the test?

MR. ESSWEIN: Yes. It's -- yeah, random. They can set it up in the background to take a test every four hours or at $2: 00$ in the afternoon, 8:00 in the evening, 12:00, whatever. It's all set, yes.

MS. HALLAM: Okay. And is it certain charges that people are convicted of where they get it? Like is it only DUIs, or how
do you determine?
MR. ESSWEIN: It's --
JUDGE LAZZARA: It would be
determined by the judge.
MS. HALLAM: The judge picks.
JUDGE LAZZARA: And I like it
because a lot of -- a lot of the folks that I have in mental health court, the bracelets get to be a bit expensive and so -- and sometimes they need much longer monitoring to make sure that they're not using the alcohol. So we may start them on -- the other one is called a TAD bracelet.

MS. HALLAM: Okay.
JUDGE LAZZARA: It's transdermal something or another.

MR. ESSWEIN: Transdermal alcohol detection.

JUDGE LAZZARA: Yeah. So we may start them on that, but then before we take them off and put them on nothing, we may want to sort of --

MS. HALLAM: Step down.
JUDGE LAZZARA: -- step them down
and use it. And it's really -- it's been really
effective in --

MR. ESSWEIN: It's about the size of a bulky cell phone.

MS. HALLAM: And how much does it cost for the person who has it?

MR. ESSWEIN: They are between \$3 and $\$ 5$ a day. I don't have --

MS. HALLAM: Compared to what on an ankle bracelet?

MR. ESSWEIN: Ankle bracelet starts at $\$ 5$ a day.

MS. HALLAM: Thank you.
JUDGE LAZZARA: Yeah. And it works really well because it does take the picture, so we actually know whose breath is in it so it eliminates some of those other problems.

MS. HALLAM: Do we know, like, is there restrictions that it's not like waking them up at four in the morning?

JUDGE LAZZARA: No, it does. It does wake them up. Absolutely. That's the whole idea because you don't think people only drink between like, you know, nine and five right?

MS. HALLAM: No, I don't, but I also think that people who are serving sentences
or on probation don't deserve -- like deserve sleep.

JUDGE LAZZARA: Well, for a lot of them, they're doing this instead of being incarcerated. So it's -- it's a good thing that they're not incarcerated, so yeah, it may -- it may talk to them at 4:00 in the morning and ask them to get up and do a breath because there are people that will drink at that time.

It doesn't do it all the time. It starts out pretty robust, I would say, would be my word, and so at the beginning, there's going to be an awful lot of times when they're going to have to do it. And then as they keep getting no hits, they're doing fine, everything is going well, it will taper off of that.

MS. HALLAM: Is there a way that they can -- like, what if I'm at work or I'm -you know, like is there any guidelines that you can set whatsoever so that people can like live normal lives? Because when $I$ had an ankle bracelet, $I$ could just put my pants down on top of it, and nobody would know, right?

MR. ESSWEIN: You could, correct.
MS. HALLAM: But this it's literally drop everything you're doing.

MR. ESSWEIN: It could be in your purse. It could be in your vehicle.

JUDGE LAZZARA: Right. Right. And you just put it in your purse. And yeah, they'll do it at work, too, yes.

MS. HALLAM: Okay. Thanks.
JUDGE LAZZARA: Because you don't have the 24-7 monitoring that you would have on the TAD bracelet, so that's why it has to pick the different times.

And the people that we've put on it like it so much better than the TAD bracelet. That's why -- that's why I'm always on his case to get more of them because they prefer it -they do than the TAD.

MS. HALLAM: Okay. Thanks.
JUDGE HOWSIE: Thank you very much.
MR. ESSWEIN: Thank you.
JUDGE LAZZARA: Thanks.
JUDGE HOWSIE: All right. We'll
now start with our public comments. Again, I'll be reading the names from the list. I want to apologize in advance if $I$ mispronounce your name. Some of your writing is not the best but $I$ will
do my very best to get your names correct.
With that being said, we'll start with Mr. Kenstowicz, and we'd ask that you limit your comments to three minutes, sir.

And if everyone could start by please stating their full name, spelling this last name.

## PUBLIC COMMENTS

MR. KENSTOWICZ: My name is John

Kenstowicz. My last name is $K-E-N-S-T-O-W-I-C-Z$, and I'm with the Corrections Collective.

JUDGE HOWSIE: Thank you.
MR. KENSTOWICZ: Board Member

Senior County Manager Stephen Pilarski posted an ACJ inspection report on the Controller's website regarding his jail inspection on $9 / 23 / 22$, in which he identified positive comments from jail staff regarding their work at ACJ. Earlier this year, many ACJ correctional staff signed a statement regarding the need to change leadership at the jail, voicing a major dissatisfaction with the working conditions at ACJ.

In 2019, NCCHC found "staffing challenges" of medical and mental health staff when there were 37 vacancies. Recently that
number has increased to 69 -- 69 people.
So why have so many people left employment at ACJ? Many of the jail's problems with lawsuits, deaths, and inappropriate use of force can be linked to severe staffing shortages.

This is the second anniversary, the second anniversary of the job jail by a vote of six to one regarding the need to conduct exit interviews of ACJ staff. In two years, I believe only two exit interviews have been done by the Board, one of Janet Bunts and the other of Michael Barfield done in 2021. President Judge Kim Clark asked the Board to do an exit interview of Deanna Kulcsar, who was the director of Mental Health Services for only four months at the jail and it was never done.

Finding out why ACJ staff continue to work at ACJ and what would help with their decision to continue to work at the jail is critical and must be done.

Before you is a comprehensive job satisfaction survey for our correctional officers at ACJ. The survey was completed with the consultation of an $H R$ expert on the faculty at Carlow College who taught a graduate capstone course on Human Resources Management. The survey was also completed by consulting with ACJ correctional staff who had many years of experience working at the jail. The survey follows a format commonly used in the public and private sector. The survey has 12 questions that are specially targeted to the working experience of correctional officers. There's an open-ended question at the end of the survey asking what are your recommendations that would reinforce your decision to continue to work at ACJ.

I think the Board has been too lax for too long regarding these critical issues of staff turnover and staff retention. I'm requesting to have a meeting with the county Executive, the Controller, the Department of Human Services, a representative of County Council, and anyone else on the Board who would like to participate in such a meeting to discuss the designing of job satisfaction surveys for all ACJ staff, correctional officers, medical and mental health staff and administration.

JUDGE HOWSIE: Mr. Kenstowicz, you have exceeded your three minutes.

MR. KENSTOWICZ: I've got a short,
one more sentence.
JUDGE HOWSIE: One more sentence.
MR. KENSTOWICZ: I am asking the Board for a vote to vote positively regarding the need to institute these job satisfaction surveys. Let's give a voice for the people who actually are doing the work at our jail. I appreciate your time.

JUDGE HOWSIE: Thank you.
All right. We'll now hear from, I believe this is Minister Ella Scales, perhaps. MINISTER SCALES: Yes. Good afternoon.

JUDGE HOWSIE: Good afternoon, ma'am.

MINISTER SCALES: My name is
Minister Ella Scales spelled S-C-A-L-E-S.
JUDGE HOWSIE: Thank you.
MINISTER SCALES: I'm serving as the current Vice President of the Pennsylvania Interfaith Impact Network. I'm here speaking today with continued hope that those that have the power to make change here at the Allegheny County Jail will do so, the Jail Oversight Board, Rich Fitzgerald, and Warden Harper.

The Bible reminds us in Hebrews Chapter 13, verse 3, continue to remember those in prison as if you were together with them in prison, and those who are mistreated as if you yourselves were suffering. So we share in the grief of those that have lost loved ones here at the jail. We share in the humane treatment of poor food quality and insufficient portions to satisfy the hunger pains. We share in the distress of those that needed, and still some need medical attention, and find themselves gasping for air, ringing bells, calling for help, not getting proper medication or treatment and being ignored or just slow to respond.

More recently, we shiver with those that are cold due to malfunctions of heating systems and lack of or minimal gap measures in place that will aid in keeping them warm.

We're grateful for the courage of the men, the women, and children that continue to speak out through surveys, through phone calls, through letters, through e-mails, to bring awareness of the conditions here at the Allegheny County Jail, not just to complain but so that something can be done. professionals would agree with me when $I$ say that when you're having a crisis or you're in an emergency, that the first few minutes are the most crucial for achieving the best outcomes. Our hope is that instead of the Allegheny County Jail being known for its inhumane treatment that it would be known for conditions and programs that promote the well-being of those incarcerated, that concerns and issues would be handled in a timely manner, and our continued hope is that you would treat those incarcerated the way that you would want to be treated.

Finally, we at PIIN and other organizations have asked for the last three months in a row to sit down and meet with you all, and we still want to do that. May God's grace and mercy be with you as you continue to care for the least of these. Thank you for your time.

JUDGE HOWSIE: Thank you very much. We will now hear from Sharon Bonavoglia. I'm sorry. I cannot say your last name. I apologize. I know the G is silent, but I'm sorry.

So here is the list of the names of people who will not be here this December for any holidays they might be celebrating with their friends, with their families, with their coworkers. Please take a moment to remember them. Richard Lenhart, Robert Blake, Cody Still, Daniel Pastorek, John Brady, Martin Bucek, Robert Harper, Vinckley Harris, Justin Brady, Paul Allen, Roger Millspaugh, Paul Spisak, Gerald Thomas, Jerry Lee Ross, Jr., Victor Joseph

Zilinek, Ronald Andrus, Anthony Talotta.
I'm sorry to have to read these names. I wish they were still here, and I hope the fact that they are not here on your watch, all of your watches here on the Board and the Administration, will lead to a continued and strong understanding of your mission to care for those who are in your custody.

JUDGE HOWSIE: Thank you,
Ms. Bonavoglia.
David Maynard.
MR. MAYNARD: Hello. My name is David Maynard. That's $D-A-V-I-D \quad M-A-Y-N-A-R-D$. I'm a staff member at the University of Pittsburgh School of Public Health and a student at the Graduate School of International Affairs, Public International Affairs. I don't speak for the leadership of these institutions but I warn you that the Board -- I warn the Board that the ongoing public health crisis and injustice in the Allegheny County Jail is not going unnoticed by the faculty, staff, and students there. It speaks to the duration of this crisis that my colleagues at Public Health have organized several meetings with this Board and also with
the Warden to implement public health interventions with the overall crisis that's been happening over the years. This has been going on for several years now. We've had several meetings. It speaks to the incompetence of the Warden with over a year of repeated warnings with the public health hazards in his jail but have not been addressed. The adverse health effects of denying inmates proper heating, nutrition, sanitation, physical activity, reading material or human contact are well documented.

While the best public health
intervention we can implement is the allowance of teeth to this Board by putting -- filling out all of these citizen slots and maybe some new leadership at the jail. We must implement the interventions that we can. So I implore the Board to work with the faculty at the school of Public Health to address the aforementioned public health problems that are in the jail at the moment, especially the heating that we've heard so much about in the past month. I believe that we can save lives this winter that way.

I know that $I$ won't rest until the eyes of this institution are transfixed on the
injustices that the Warden and Rich Fitzgerald can't even muster shame for.

Now I did notice on the agenda that the book committee -- there's a -- instead of talking about the book committee's activities, it's talking about the creation of the book committee. So I'm really hoping what that means is the book committee has been created, is active, and we're going to vote on the motions that Bethany Hallam put up last month because really there's no excuse for that to be put off any longer. Thank you.

JUDGE HOWSIE: Thank you. We'll now hear from Angel Rose Kapiris, Kapiris.

MS. KAPIRIS: Hi, my name is Angel Rose Kapiris, K-A-P-I-R-I-S. I would like to start off by thanking y'all for coming and holding these meetings to address the issues that many people don't bother to notice. And the inmates at the ACJ would like you to know how things are on the inside.

The Allegheny County Jail has
methods close to torture for everyday lives of inmates. These inmates have to not only bear and tolerate but are forced to live in conditions
most humans can't even imagine, and the facility allows it. The jail serves them not only unappetizing but inedible and health-hazardous food that, on a regular basis, has vermin droppings, dead animals, mold, a variety of bugs, including roaches, embedded in their three meals a day. They are supposed to be able to sustain the inmates through their entire time in the facility.

These inmates also have to endure extreme temperature changes inside of the jail to the point that these men and women can see their own breath on cold days and purposefully move their cots to the floor to try and get more heat from people on the other side of the cell wall. Why the jail leaves these inmates to suffer under such extreme conditions should disgust any and everyone. They not only are left cold and hungry, but they then have to endure mental and emotional abuse from the guards who maybe just don't like you, are having a bad day, or simply because they can abuse you knowing that you're voiceless and powerless under their control. This can look like anything from taking something off of the inmate that they had to buy for
themselves from the jail or sending them to the hole, which is solitary confinement, where they're forced to spend anywhere from seven or more days and 23 hours inside of a room with no extra food, no blankets and more things that we all use on an everyday basis as basic humans. Most people can't even imagine what that does to someone's mental, emotional, and physical health, especially when some people have done nothing to deserve such a severe punishment.

Alongside that statement, I would like to comment on one specific guard. His name is Brian Englert. He has been described by the inmates that he is less like a guard and more like a ringleader and a bully. He's known among inmates to not only be racist and homophobic but to purposefully try to pit other races against each other and only hire certain races unless there's no other option. There have been instances where a PREA, which is a Prison Rape Elimination Act, has been put against this guard specifically, and instead of handing it in a professional manner, Guard Brian Englert decided to use his power to bully, harass, and demean the inmates until he finds any reason that he would
like to send them to the hole, even if the reason is not valid of such punishment.

All of these things, like it or not, are the facts and these inmates must endure this abuse no matter how long and how unjust it is, and all of that is still just scraping the surface on the issues occurring in this facility.

In conclusion, $A C J$ is one of the largest and most secure buildings in America and in the world. And with finding the information stating that they have a budget of over $\$ 50,000,000$ a year, $I$ wonder where their funds are going that they cannot afford to treat inmates with basic human decency. And the only conclusion that $I$ can come to is that they just simply do not care about the taxpayers' dollar nor humans, in general, to know that these are everyday conditions, and to sit by and do nothing while the people that we know and love are being tortured inside of this government-funded facility.

These things can all be changed. I believe that Warden Orlando Harper should take responsibility by personally implementing and overseeing to make sure that the food is edible
and not health hazardous, possibly health inspector checks regularly, using the temperature controls inside the facility to keep inmates at a livable temperature, and proper analysis by a judge of punishment due to behavior write-ups to avoid abuse of power among guards and to ensure that no one individual can be treated for unjust reasons.

JUDGE HOWSIE: Thank you very much, ma'am.

MS. KAPIRIS: Thank you.
JUDGE HOWSIE: Thank you.
We will not hear from -- I believe this is Dominic Rometo, "Rometo."

MR. ROMETO: Hi. I'm Dominic
Rometo, $\mathrm{D}-\mathrm{O}-\mathrm{M}-\mathrm{I}-\mathrm{N}-\mathrm{I}-\mathrm{C}$. Rometo, R-O-M-E-T-O. I have a loved one -- my girlfriend is -- she's in drug court. She's been in drug -- she was in drug court in 2016, and she graduated. Something happened. She was on probation. She violated -she chose to go back into drug court, and I believe that there's just some type of scam or something just to try to keep people coming in and out of the jail on a rotating -- and like she said before me with the conditions of the jail --
well, long story, she -- she was pregnant. She found out she was pregnant while she was in jail. She was on her medic- -- the medication. She had to -- they had to change all her meds. She went to that Passage -- to Recovery they were talking about earlier, the halfway house. It used to be female offenders. When they brought her there, they gave none of her meds. As far as 1 believe, they're still in the jail's count. She had none of her meds, psych meds, sleeping meds, nothing. On the third day, she had a miscarriage.

> I'm her emergency contact. She called -- she said that she wanted me -- they said they were going to contact me. They never called me, nothing. I didn't have -- I didn't hear from her for two days. She was in the hospital, whatever. She tells me she didn't know how to tell me. She was upset about it. We both are.

But she still went two or three more days without her psych meds, even after that. But somehow, for some reason, she told me that they don't like to even -- she was on Subutex because she can't get the Sublocade shot because she was pregnant, so they had her on Subutex. They don't do that there, but why would they send her there? But the very first day after she had her miscarriage they hurried up and rushed her to Central Outreach to get her Sublocade shot. They were so worried about her getting this shot, but they couldn't worry about her getting her own medication that she'd been on for years, her sleeping med, her psy- -- her depression meds. It's just an --

And she had court October 27th and she was -- she went there the day before court. They have a five-day blackout -- or a five-day quarantine, so she had to reschedule -- they couldn't go to court. The whole thing with her going there was supposed to get her out faster. Well, now she missed court. They still -- that was October $27 t h$. They still haven't scheduled her a court date at all because she told drug court she wanted to close out because they keep messing her up, messing her up.

They put her in jail for the craziest things. Just if you're not there, right there when you're told, or they just put these stipulations -- and like how you said what's the point of letting somebody out if they're not
really free? If they can't experi- -- or they can't enjoy their life because it's so controlled -- and with the house arrest monitor, telling her she can't even go to her work? They told her -- she lost jobs because of drug court telling her she couldn't go at times, and she had permission, and she had to come home early. They -- you know, employees want you to be able to -- an employer wants their employee to be on call if they need you to come help or stay longer because somebody can't come, but she can't do that. And she is tired of it, and she wants to fight against it, but now they're putting her in positions to where she's been in there for three months without even a court date now. Now she just wants to come home.

I'm just sorry. It was very
emotional, and I appreciate everybody listening, and have a nice day.

JUDGE HOWSIE: Thank you, sir.
Thank you.
Robert Matta?
AUDIENCE MEMBER: That was an
error.
JUDGE HOWSIE: Was an error. Okay. So he will not be speaking?

AUDIENCE MEMBER: No. JUDGE HOWSIE: Okay. Allison Haley-Lewis.

Hello.
MS. HALEY-LEWIS: I'm Allison Haley-Lewis, $H-A-L-E-Y$ hyphen $L-E-W-I-S . ~ I ' m$ here on behalf of the Corrections Collective, which is a community-based advocacy group representing over 20 organizations that advocates for a system that fosters rehabilitation rather than punishment.

One of the stated goals of the jail redesign is to provide additional tools for programming and services for those individuals who are incarcerated at the facility. As you and the County reimagine the jail, we advocate that the jail increase their partnerships with community-based mental health organizations and that the County provide financial support for said partnerships. We know that mental health treatment is a key influence on an individual's likelihood of incarceration and recidivism, and while there are programs for mental health offered in the jail, they are not accessible to
the entire population. Forming partnerships with community-based organizations can expand the provision of mental health services and allow for continuity of care. Having contact with service providers greatly increases a person's comfort level in obtaining services. And a provider's ability to make contact prior to release will improve service utilization once individuals return to their community.

Additionally, the jail has struggled to retain mental health personnel for a variety of reasons, I'm sure, including burnout, and having mental health providers split their time between community and incarcerated settings could reduce this.

We'd also like to advocate for a guaranteed private space for individuals to meet with mental health providers. Privacy is a necessity for mental health treatment, and the interview rooms in the jail meant to provide this are currently off-limits as they're being used to store tablets. So we request that a new location be used for storing tablets so that interview rooms can be used for meetings between mental health providers and individuals in the jail.

Thank you for your time.
JUDGE HOWSIE: Thank you. We will hear from Tanisha Long.

MS. LONG: Hi, before I say my
name, $I$ just want to say thank you for moving Public Comments back up to the front. It really helps to like accommodate people with schedules, so I do appreciate that.

My name is Tanisha Long, T-A-N-I-S-H-A L-O-N-G. The Allegheny County Jail's policies concerning mental health designations and tiers is inhumane and unacceptable.

In an April Jail Oversight Board meeting, Warden Harper described the policy of denying people recreational time based on their mental health tier as such. Incarcerated individuals living on mental health pods -mental pods are designated in tiers, which has been approved by a medical doctor, and the provider determines what tiers these individuals are.

Individuals on Tier IV and $V$ do not get any type of recreation for their safety. Tiers I, II and III get out-of-cell time. This
is the process we put in place.
For those not aware, people in the jail's mental health pod do not get to take tablets into their cells. They're only able to message loved ones, access entertainment, or read E-books during rec time, so no rec time for Tiers IV and V. They cannot communicate with their families.

This means incarcerated people with mental health issues are not only being isolated from human contact and socialization, but they are effectively being placed in a punitive situation based on a mental health condition they cannot control.

Earlier today, Rachel Bridgeman, a young lady who spent two months in jail due to a behavioral hold placed on her by jail staff, was reunited with her sister from Georgia, who took a bus to come fight for her. Due to the tier system, she did not have access to a tablet to let her family in Georgia know that she was incarcerated and spent two months in periods of isolation. As her mental health declined, she was tased, and she attempted suicide. Her family thought she was dead because they had not heard from her since August. She was not able to go to court because staff did not remove the behavioral health hold even after her mental health tier was moved from a $V$ to a II. Had other incarcerated people not reached out, she would likely still be in jail, and her family would never have known.

The jail did not contact her when Rachel was hospitalized. They effectively contributed to her mental health decline, self-harm and prevented her from attending court because of the tier hold.

As we know, the jail also -- as we know the jail no longer requires masking, but they do require a period of isolation for ten days in response to the COVID-19 pandemic. During this time, tablets are not given to people on mental health pods. The rec time is not given, and there's no socialization. Tablets do not spread COVID, so why are they being denied during this isolation period? The policy of ten-day isolation is nonsensical given the fact that correctional officers go in and out of the jail daily and pose the same risk of spreading the virus but require no special quarantine. The Warden is behaving as though only people charged with a crime can spread COVID.

And finally, I'm not -- I'm sure you can imagine the mental toll ten days of isolation can have on a newly incarcerated person. The Warden loves to tell the benefit of the tablets, as a means to keep in touch with families, but this is denied during isolation. With the jail's reliance on the mental health tier system, it is entirely possible for an incarcerated person to rise in tiers due to this isolation. Increased tier level means denied privileges when they leave isolation. It leads to behavioral health holds and can lead to suicidal behaviors and is that the point? Does the jail want to break spirits of incarcerated people?

I ask the Board to force the jail to lower this period of isolation as it is nonsensical, and they can be tested out of it. Thank you.

JUDGE HOWSIE: Thank you very much. Brad Korinski.

MR. KORINSKI: Good evening,
everyone. Brad Korinski, K-O-R-I-N-S-K-I, private citizen. I come here today in support of

Mr. K's proposal for exit interviews and for a deeper examination of the staffing problem. I was on the call with Nurse Bunts more than a year ago. What she related to us were problems that were systematic, that were chronic, and that provide context as to why the county continues to have staffing issues at the County Jail. It wasn't simply a clash of personalities that caused Ms. Bunts to leave. And to put her in some context, she had been a state Corrections employee for 30 years. She was no shrinking violet. She had seen some difficult things, but to her what she encountered at the Allegheny County Jail led her to quit rather quickly and rather abruptly. That needs to be followed up on. We need to uncover those notes, revisit this issue, and start to examine why there continues to be a staffing problem that has gone on really for more than a decade. Because in a county jail, there are a lot of factors that are beyond the Warden's control, that are beyond the County's control. That's why for most people, a county jail is not a good place to be because a lot of things can happen. But there are things that are within the county's control. Food, commissary, access to communications and loved ones, staffing facilities. And hopefully, now that the jail has a liaison position, can develop some institutional depth that the Jail Oversight Board can then tackle those issues that are within its control, that we can ensure that we're getting good food, timely commissary, facilities that work properly and then focus attention and resources on those to control those factors, because we are a county that is a well-run county, that is a fiscally advantaged county, and these issues that we continue to hear time and again should not have to happen.

So thank you for your time and all the effort that you've put in. I appreciate it.

JUDGE HOWSIE: Thank you very much. Thank you. Jodi Lincoln.

MS. LINCOLN: Hi. Thank you. Jodi
Lincoln, J-O-D-I L-I-N-C-O-L-N, she/her pronouns.

On social media and in these meetings, jail staff keep touting these 20,000 books they have available to folks inside. However, when we actually speak to people who are incarcerated, no one is clear how to request
those books, what's available or how to get them. While the county is spending millions of dollars right now on Reimagining the Jail with the help of CBI Architects, I propose that the jail creates an actual physical library that people can access during recreation time and out-of-cell time and actually check out books from. E-books do not replace the need and benefit of physical books and having a library.

There are lots of jail and prison library programs and models around the country that the jail can learn from. For example, in San Francisco, the local library system runs the library services in the jail, including research and educational assistance. They have a dedicated staff and a robust budget.

A couple of key things that ACJ could do to make a library successful. Hire a professional librarian. Pittsburgh has lots of them. We have one of the best library science schools in the country at Pitt. Have a book budget to make sure that the books are replaced, and titles kept up-to-date. Make sure that there are in-demand and culturally relevant titles, both fiction and non-fiction. A well-funded and
accessible library in jails not only has a positive impact on the people inside, but also on the safety of the jail as a whole. If the goal of the contract with CBI Architects and the Reimagining the Jail Program is really to implement reforms in the justice system, as Amy Don has claimed, and to expand programming, creating a library is a really, really low-hanging fruit.

Please consider this as an extremely important part of improving book access for incarcerated people and reimagining the jail. Thank you for your time. JUDGE HOWSIE: Thank you very much. I apologize. I cannot make out this name, but it looks like the first name is Beth.

MS. SChONGAR: Beth Schongar,
S-C-H-O-N-G-A-R. Allegheny County Jail lacks proper staffing in the Medical Department. Sorry. The Allegheny County Jail has more people needing medical care than the medical staff can handle. The result is large gaps in medical care in the jail. Two or even three doctors cannot provide coverage at the jail $24 / 7$, with more than
half of the 1,500 people having serious medical and/or mental health issues. Overall medical staffing also has big problems. Last month, there were 69.5 open positions in the medical department, of which about 52 were direct care positions. We're talking 20 nurses; 20 in mental health care and addiction care; 12 doctors, physician's assistants and nursing practitioners.

As a result of understaffing, people are missing essential treatment and medicine, such as insulin. Doses are delayed or skipped, or prescriptions in place before people arrived are not continued. Trans people are missing hormone treatments and end up with breakthrough bleeding. People suffering depression are missing SSRI doses resulting in suicidal thoughts and attempts. People die of contraband drugs because MAT, Medication Assistant Treatment, needs more medical staff before it can be implemented for everyone who needs MAT, and the list goes on.

We must drastically reduce the number of the people in the jail since we cannot provide adequate medical care. And we should not be talking about prioritiz -- about privatizing
or outsourcing incarceration, leaving us with even less transparency.

JUDGE HOWSIE: Thank you.

We will now hear from

Marion Damick.

MS. DAMICK: D-A-M-I-C-K, like Damick it. Okay. Actually, I'm glad I came a little late because $I$ got to hear quite a few -all the things -- not all the things, but most of the things going on because I lost the note that I wanted -- what $I$ wanted to say. I can give you some answers, some ideas that you might try, try, please.

Okay. First, I want to tell you about the inviting -- I mean, notifying -- this came up at the last meeting, notifying the parent of an inmate who is deceased, the problem. That came up many years ago but -- in another Oversight Board. And even one of the judges said, oh, yes, she knew that it was -- it would be a jam. A lot of people, and really it was the hospital who said we can't take care of it. You have to stop that. So they, unfortunately, stopped everything, including noticing. You should notice -- when you -- you should give --
it's important that you give notice when an inmate has died to the person who was listed on their report. They list somebody, usually a mother, but whoever, somebody else.

And give them at the same time the information that they should not try to visit the -- in the hospital, that there's going to be -- there is always a guard there. It causes a problem. You will have the police come in. It's a mess. Please wait, and we will keep you in touch and immediately send you the report from the coroner. Immediately. That's one thing that seemed -- the jail seems to fail in doing anything immediately. Please do.

However, one of the thoughts that I've had on all of these problems is work with Pitt Med School. Really work with them and see if you can get them to require a student, all students who are taking mental health medical information or health or whatever studies, as well as medical studies, that they spend one semester at the jail working, one semester, and give a report back immediately after that semester, or even if they discover something that's crisis immediately. Require them to do
that. You might -- who knows, be able to get some of this in -- what's happening changed. They can get -- bring new ideas into what you have. But it's an idea that's been tried at other places, and it works. Something out to work here because very little does.

The other thing is $I$ have both Pitt and the medical people informing parents. And frankly, if you just did that, I think everybody -- half of the people who are coming here wouldn't need to come. But you've had some very important people whom $I$ know -- happen, come and complain and pfft, you've done nothing. I'm telling you, try to do something. Forget -- I'm not going to be able to tell you what's going wrong, but get rid of the rats. Or one thing you can do, make the person who comes -- the head people, eat the same meat. In fact, if you give the rats the meat, they're going to die anyway. Okay? That's it.

JUDGE HOWSIE: Thank you. Thank you, Ms. Damick.

We will now hear from Laura
Perkins.
(No response.)

JUDGE HOWSIE: There's no Laura Perkins, no? Okay. I believe this is Reverend Dave Swanson.

PASTOR SWANSON: That's a tough act to follow.

JUDGE HOWSIE: Absolutely.
PASTOR SWANSON: My name is Dave Swanson. I'm Pastor of Pittsburgh Mennonite Church and convener chair of the Spiritual Leaders Caucus for the Pennsylvania Interfaith Impact Network.

My comments today -- really, they're not comments. They're a plea, and they're directed specifically to you as the Jail Oversight Board. I've been coming here for months now and hear story after story, data coming from so many people, and $I$ recognize that it is easy to numb out under the weight and volume of the data that is coming at you and the stories, the tragedy in them. But I'm here to beg you, Board, to not let that happen, to bring your humanity with you into this room, into your role as the Jail Oversight Board. Don't allow yourself to numb -- become numb in the face of this tragedy. Instead, recognize the moral
tragedy that is happening and the ethical and legal injustices that are happening in the jail over which you have oversight. I beg you. Allow yourselves to become properly disgusted and dissatisfied about the situation of real human beings incarcerated in this jail. I beg you. Become more motivated to make life livable for people in your facility. I beg you.

And the way to do that is to exercise accountability over these people here who are in charge of the day-to-day operations. Rigorous accountability over the jail staff. Demand immediate reestablishment of humane conditions in the jail. Do not allow the excuses of contracts, of institutional stability and expedience to prioritize -- to not allow them to take priority over the real situation of real human beings who are suffering and dying. I beg you.

Instead, prioritize the well-being of the humans, our neighbors, our family, who are at your mercy. They have little to no power, but you do. Thank you.

JUDGE HOWSIE: Thank you.
We will now hear remarks from, I
believe this is Clara Swanson. Forgive me if that's not your name.

MS. SWANSON: Hello. My name is Clara Swanson, $\mathrm{S}-\mathrm{W}-\mathrm{A}-\mathrm{N}-\mathrm{S}-\mathrm{O}-\mathrm{N} . \mathrm{D}$. $\mathrm{C}_{\mathrm{e}} \mathrm{is}$ my father, and I am 17 years old. I am a senior at Woodland Hills High School.

I'm here today to remind you that these deaths and the continued mistreatment of the incarcerated people at the Allegheny Jail is a deep concern of the people here, adults and youth alike. Now, maybe the ability to ignore and abate injustice is something that happens when you get older, but I'm young, and my middle name is Justice. This will not stand. Judge Howsie, since you are the Chair of this Board, my question is for you. Months ago, this Board promised to hire a liaison to get some real information about what is going on in this jail to you and to us, the people. It has been months. Now tell me, what is the reason for this atrocious delay and what are you going to do to make this hire?

JUDGE HOWSIE: I don't answer
questions.
MS. SWANSON: Okay. The next time, put it on the agenda. Thank you.

JUDGE HOWSIE: Thank you.
We will now hear from Nadia Narnor, perhaps.

MS. NARNOR: Hi. Nadia Narnor, N-A-R-N-O-R. I'm an organizer for CADBI-West. I wanted to say thank you for moving Public Comments up. That's very nice for us. I just wanted to say that there's so much retaliation that happens in this jail between the guards, between the people incarcerated, and it's happening too often. It's not only censorship but isolation from being able to advocate for yourselves. People's tablets are being taken away because they get -- they're talking to their lawyers. People are being framed for contraband when they were never even in their cell. What are you going to do about it? Because if people are supposed to be doing their jobs, they're really not doing it. So what are you going to do about it?

People like Aaron Tipton are in danger, and they can't speak to anyone else. What are you going to do about it? We want our communities to be protected, not be crying out
for help and ignored, and clearly, that's something you all think is okay. What are you going to do about it?

People in 3-B had no heat for over three days. Over 60 men had no heat and the temperatures were under 21 degrees. Due to decisions made by this Board, incarcerated people are not given warm blankets. Instead, they're given suicide-resistant blankets that they cannot properly warm themselves with. Extra clothing was not provided, even though the $P R$ guy said they were, and the Jail Oversight Board was not immediately notified, which is not a surprise, but that's illegal.

The Warden does not believe that he has to be transparent when problems arise at the jail that threaten the safety of incarcerated people and the people that work there. Contrary to this belief, the jail is not run at his discretion, and he does not have a right to torture people in there.

As members of the Jail Oversight Board bundle up in warm clothes and tuck yourselves to sleep every night, I beg you to consider the three days of misery that people
could have had prevented. An extra anti-suicide blanket is not enough. We need real solutions before we face another heating crisis, which I am sure is going to happen, and I will be here to talk about it. We need to know when the jail is not being heated properly. We need to know when sick calls aren't being answered and how people are waiting, waiting to know when they're going to have edible food, when their next lockdown is going to be, and when the Warden is going to next violate the solitary confinement referendum that we all signed. We deserve to know every single thing that happens at the jail, because there's so much wrong happening, and $I$ don't know how you sleep at night.

JUDGE HOWSIE: Thank you.
I think that was the last public
comment. We will now hear from Erin Daltman - Dalton, I'm sorry, regarding Rethinking the Jail. Sorry about that.

## PRESENTATION - RETHINKING THE JAIL.

MS. DALTON: Thanks. I think I'll just sit here if it's alright with everybody.

I'm Erin Dalton. I'm the Director of the Department of Human Services, and I'm
happy to give an update on the reimagining, repurposing, rethinking the Allegheny County jail.

We published a bunch of updates to the Safety and Justice web page earlier this week, so members of the public and the Jail Oversight Board can certainly take a look at that, and I'll provide a brief update for everyone.

And I think -- I think it's just worth saying that there's been for as long as I've been in this county, not just working for the county, a group of people, changing actors who have worked to think about broader criminal justice reform, kind of looking around the corner at what we can do to continue to be better and improve operations. That does always include the jail, the Department of Human Service, members of the Court, the Health Department. I mean, I see this as one of those kinds of bigger initiatives, thinking about how we use this jail and how we use it in the future.

It's been 30 years since any planning effort went into thinking about the actual facility, and we know that facilities and
their needs change, and that space matters to people, right, you know, where we -- you know Google and Amazon wouldn't be spending all of that money on spaces if it didn't really matter to the culture of the place where people work and the place when people are. So I think that the physical plant matters, and the population that's being served in the jail is really different than it was 30 years ago, and we have less people in the jail due to a number of reform efforts that have happened across those partnerships that we've had for years. So $I$ think it's a really good opportunity for all of us in the public, people here, people on the Jail Oversight Board to participate in that kind of planning process, thinking about what we need today and what we need in the future.

So I'll give a little bit of an update on the -- kind of how we got to this place, a little bit of an update on who the partners are and what the next steps are.

There's two kind of groups that you might not be familiar with that I'll talk about; so one is the MacArthur Foundation. They're a national foundation based in Chicago. They've been on at least a ten -- maybe a ten-year effort to work with communities to reform criminal justice systems and bring more equity to that process.

And then locally, there's the Institute of Politics chaired by former Chancellor of the University of Pittsburgh, Mark Nordenberg, and on this initiative partnered with Fred Thieman, former US Attorney, Buhl Foundation President, and so on, who have also been instrumental in helping us think about these broader reform efforts.

So for the timeline, and again part of broader reform back in October of 2018, Allegheny County and the Courts submitted an application and received a grant to participate in the MacArthur Foundation Safety and Justice Challenge. So that was a big effort that we - we put forward. And that is a national initiative aimed at reimagining and rebuilding local criminal justice systems to reduce jail incarceration and increase equity.

Another really important event that happened in the past couple of years was in 2019, that Institute of Politics Group, they convened a
forum here in Allegheny County called Repurposing Jails to Meet 21st Century Needs. While this forum focused a lot on New York City and what happened in the reform efforts at Rikers, it also encouraged us to look at things that are happening, you know, in Europe, Denmark, and so on, where facilities operate really differently and people have open spaces and communal kitchens, have opportunities to participate in more programming.

And closer to home, just in Chester County, the Pennsylvania Department of Corrections recently launched what they call a Little Scandinavia Unit. You know, residents there have access to a communal kitchen, a landscaped green space, radically redesigned cells, furniture in common areas. So these things are happening around the county and around the world and something that we can learn from in Allegheny County.

So after that and, you know, lots has changed over the past couple of years with COVID and so on, so making these things harder to put into place, but we've moved forward with the next set of MacArthur initiatives. We were lucky enough to be one of just a few sites selected for additional funding from MacArthur because of our jail population reductions and our reform efforts. And so in February of 2021, we put forward for those -- for that additional funding, and in that, we included a number of initiatives, including this one that I'm talking about today, which was to fund a community-informed redesign, that is physical structure of the jail, to reflect a significantly smaller population, optimize space for colocation of human services, including diversion programming and other prevention services.

We issued a solicitation in August of 2021. We received seven proposals. We reviewed those, and we made a selection. So the county has, as you know, $I$ think, recently contracted with TranSystems. They're an architectural and engineering firm, who is also leading -- who is leading the group that includes DLR. They're an architectural and planning firm, and they have deep experience working on jail and criminal justice systems. They're also joined by Dr. Robin Timme of Falcon -- Falcon, Inc., who has vast experience in delivering and overseeing
behavioral health services, as well as locally based Pittsburgh Modeling Consulting, who's tasked with bringing voices of people into the process. So their principal has supported various local community engagement and planning efforts. So that's the team. They've been recently bought. A number of these groups have been recently bought by TranSystems, so I hear. You know, CDL and others, those are -- that's all the same teams so -- but there's been a number of kind of acquisitions and mergers. So that's the team working on this project with us.

We recently kicked off -- I think the folks were here last week or the week before. The consulting team visited the jail for an initial walk-through, and the process will conclude in late 2023 with a set of design options and accompanying cost estimates.

So over the next year, you know, starting now, the team that $I$ just mentioned will review the relevant data and projects going on in Allegheny County. They will conduct a deeper operational assessment of the jail. They'll conduct a physical assessment of the jail. That includes things like lighting, HVAC system, plumbing, things of that nature. They'll consult with the two existing advisory committees that we have. That's the Safety and Justice Challenge Criminal Justice Reform Committee and then the Institute of Politics Justice Reform Progress Panel. They'll facilitate listening sessions twice with 10 to 12 individuals that include people that are currently incarcerated, friends and family members of individuals who are incarcerated, and they'll also talk with people who are serving folks in the jail, service providers and others. They'll certainly consult with criminal legal system partners, including the jail, public defender, judges, district attorney's office, court staff and so on.

Then they'll issue a broader survey to -- that all Allegheny County residents can participate in, so everyone in this room will be able to provide feedback on this process.

They'll use all of that feedback and that planning process to develop a set of design options with accompanying cost estimates for the consideration of the county and the courts, and then, you know, we'll go from there, right? So we'll have a pretty extensive robust
planning process, use the results of that planning process to develop multiple design options, and then -- and then we'll see what the county and the courts want to do with that information.

And we will -- we will continue to provide updates on the SJC, the Safety and Justice Challenge Website on that process. We'll make sure that folks are aware of how to complete that survey when it's issued. And I have -- and certainly will continue to urge the consultants to listen in to the taped versions of these meetings. We heard several comments tonight on how the jail might be repurposed, how that space might be used to better service for our current needs, for intake, and library, and services and so on.

And so I'll just say $I$ do think -I do hope people are excited about this project. It is an opportunity to look around the corner for what we need today, which is a smaller facility, more diversion, more programs, in my opinion. I'll -- they'll have an opportunity to provide feedback on the survey I guess as well -but to really think about what we -- what we want for this facility for the next 30 years, if you will.

So that's -- that's my update, and I'm happy to answer any questions if there's time.

JUDGE HOWSIE: Any questions?
Ms. Hallam.
MS. HALLAM: Thank you. I have a
few. First of all, I want to thank you for coming. I know that you know that we've been wanting you to come and report on this for a long time. So before $I$ get into my questions, I want to start off by thanking you, okay?

So the first thing that $I$ was writing down is really just about language. I know you talk a lot about the people we serve, but like we incarcerate them, so our job is really to mitigate harm. We're not serving them by locking them up or any of the things we're doing for them in there. So that was merely, you know, language.

Another thing is that you talked about the collaboration, participating in the planning of things, but yet neither the Jail Oversight Board, or County Council have been involved in any of these conversations. And so I'm wondering how -- how we can have a collaboration when arguably two of the most crucial oversight bodies of the Allegheny County Jail have not been consulted, have not been included in the conversation? This has been going on for months, and this is the first time we're getting anything on it.

MS. DALTON: Yeah. I mean, we have made a couple of updates to the Jail Oversight Board over the past year or so prior to initialing -- the solicitation, $I$ think when the solicitation went out. And I'll work with other county partners to think about other participation, but certainly, the Oversight Board and County Council will, as members of the public, obviously have an opportunity to participate in that survey.

MS. HALLAM: Right. I mean, I'd really appreciate if members of the public are included as well, but I'm not asking for our participation as members of the public. I'm asking for our participation as Jail Oversight Board members, as County Council members, as other various elected officials, judges,
community members, right?
It seems like every time we hear anything -- because, yes, we were told this is happening. That's the reports that we've gotten so far. Why is it never, what should happen? Why is it never, who do you all think should happen? Why are we completely left out of the conversation? We're literally the statutorily mandated Jail Oversight Board, and this is reimagining the jail that we're the oversight Board of.

MS. DALTON: Yeah. I will -- I
will consult with -- with the team on
opportunities to bring groups in. I can
imagine -- there's sort of a couple of groups that we see as key stakeholders. Obviously, the people that are incarcerated in the jail and their family members, people who are working with folks who are in the Allegheny County Jail, but also the members of the criminal legal system, people, you know, in the PD, DA's office, perhaps those -- we can arrange some stakeholder engagements with you as -- in that context.

MS. HALLAM: Yeah. I was going to say, is there a way that $I$ can participate in
these stakeholder meetings? I am a stakeholder.
MS. DALTON: Right. So I will absolutely take that back.

MS. HALLAM: Okay. Can you try to like push it a little bit, too, when you take it back? I would appreciate that. I'll be helpful, I promise. I promise I will be.

Okay. Thank you. The next thing that $I$ have is about -- oh, so $I$ was looking on the website, the Safety and Justice or whatever link $I$ was looking at, and so one of the things $I$ noticed that was like a goal was providing representation at bail hearings, and next to that goal it says that it was fully implemented, but it has not been. And so I'm just wondering what you define as fully implemented because I know for $a$ fact that bail hearings are happening without representation.

MS. DALTON: Yeah. I'll check that. I don't think it has been fully implemented. I -- that was a pilot, and I think they're -- they're trying to get to full implementation, so I'll check that language but I -- and we can provide an update.

MS. HALLAM: And $I$ can give you the screenshot if you want or if you want to pull it up. I have a screenshot of it.

MS. DALTON: No, I believe you. Let me take a look. We want that information to be correct. It's problem- -- it's likely that the pilot was fully implemented, but that clearly, we haven't gotten to full implementation across the county.

MS. HALLAM: Yeah, so I do enjoy the fact that there is the website there that kind of seems that it's keeping things up-to-date, but it's kind of useless if it's not accurate.

MS. DALTON: Absolutely.
MS. HALLAM: So if we can just
change that language to either like maybe a step process, like pilot started. It's happening. Fully implemented, something like that.

MS. DALTON: Sure. Absolutely.
MS. HALLAM: And other than that, just one thing $I$ wanted to add is $I$ was talking to -- and maybe you can take this back until I get my stakeholder invite -- but I was talking to someone who was involved as part of the original construction of this jail, and we switched
over -- and something that they were suggesting that was brought up a lot, and again, I was like in kindergarten when this happened, so I wasn't there, but this was just relayed to me -- is that if you notice that most detention centers are horizon buildings and that's for a specific purpose. Like there is an intention behind the design of detention facilities for safety, for security, just for the well-being of the people incarcerated there and the people who work there as well, and that folks fought really hard against the vertical construction of the jail at the time that it was built, and now we're seeing the ramifications of that, of the pod system, and we're seeing the problems that happen with that. So do you think that -- I mean, I'm not, $I$ guess, asking you to commit to doing it but that would be cool if you did, but like do you think that you could take that back to make sure that that's at least considered, that they look into best practices of the physical construction and design, and that we possibly -if a facility has to be built, that we maybe do it the right way this time as opposed to like some riverfront, vertical property?

MS. DALTON: I -- absolutely people will -- the team will look at what is state-of-the-art now. I believe a bunch of the proposals that we received referenced that at the time, I guess that was like what they built -they felt was state-of-the-art, so we need to look at what state-of-the-art is today.

And the team that we've contracted with has expertise in doing that, and so we absolutely do want to be looking at what's best -- you know, best today, what are those standards, and then how we can try to figure that out within the current space.

MS. HALLAM: Okay. Thank you very much.

MS. DALTON: Uh-huh.

JUDGE HOWSIE: Any additional
questions?
CONTROLLER O'CONNOR: Sorry, I do. Sorry, I'm late, everybody. We have -- wife has the flu, and it's a crazy time at my house. I'm good though, so don't worry. I told Judge that. I should be sitting in the quarantine.

So just real quick. So I don't have my exact note in front of me, but we did question, or we reached out to the organization that's doing this for you guys, and $I$ guess in September, they had only logged in ten hours of work.

MS. DALTON: Uh-huh.

CONTROLLER O'CONNOR: Are we going to be tracking that throughout the process of how much they -- I mean, my thought is it's $\$ 700,000$. Like are we going to be sho- -- taking care of what they're actually doing, how many hours they're actually working?

MS. DALTON: Yeah.

CONTROLLER O'CONNOR: I'm just thinking from the Controller's standpoint, this is taxpayer money. Let's make sure they're actually doing the job, but it was just alarming. Like they came in July, and they only had ten hours in September. Maybe it's been more since then, but is somebody going to just be tracking that throughout?

MS. DALTON: Yeah, of course.
CONTROLLER O'CONNOR: Okay.

MS. DALTON: Of course, we will.
They will have to submit invoices with hours, as you can tell.

CONTROLLER O'CONNOR: Yeah.

MS. DALTON: And they're clearly not overbilling them.

CONTROLLER O'CONNOR: That's a good sign.

MS. DALTON: No, I mean -- no, the project really just started.

CONTROLLER O'CONNOR: Okay.
MS. DALTON: They were here a week or two ago. I don't -- I don't even recall them being in here in July. We've really just kicked off the project. So there was -- there's -- and then part of the reason we haven't been here to provide updates is because there was really nothing to update on. We executed a contract. We've done some planning over the phone, and the first real kickoff of the engagement was, you know, a week or two ago when they were in town.

CONTROLLER O'CONNOR: Okay. Yeah, that's fine.

MS. DALTON: But absolutely they will be --

CONTROLLER O'CONNOR: Sorry. I didn't hear your beginning, so I just got here. But just to follow up on that, are we -- are
there going to be sort of like town hall meetings and discussions in neighborhoods about, you know, what they'd like to see, or are we going to do any of that sort of outreach as well?

MS. DALTON: Right. There's a -I did update on that. There's a bunch of information on the website. There will be focus groups with key stakeholders, including.

CONTROLLER O'CONNOR: Santa Claus is coming too, yeah. Yeah, he'll be here soon.

MS. DALTON: Including
Santa Claus -- people who are currently incarcerated, people who have been previously incarcerated, family members of incarcerated. There will be a survey available to the general public.

CONTROLLER O'CONNOR: Okay. All right.

MS. DALTON: And so anyone can participate.

CONTROLLER O'CONNOR: Thank you. Yeah. Those were my only two questions. Thank you.

JUDGE HOWSIE: Ms. Hallam.
MS. HALLAM: Yeah, I'm sorry. I
was just reading my notes, and $I$ forgot one of the questions that $I$ wanted to ask, which I -- I mean, it's definitely the most important question.

But $I$ know you have talked, and I've heard the County Exec talk about it as well years past, about a goal of getting the population down to a certain number. I know that's kind of like the idea of the smaller facility and the new facility, too. I know the number that he referenced when $I$ heard him talk -- I think it was at an Institute of Politics thing a few years ago -- was 600. Is that still the target? Is it maybe lower than that, or is what is the target population -MS. DALTON: Yeah. MS. HALLAM: -- that we're trying to get down to?

MS. DALTON: For the purposes of this project, we have not set a target. I want -- I think we all want to hear ideas about how to better use the space. And as part of the MacArthur Initiative, we do make estimates on the impact of those kinds of -- of the investments that we're making. And so while we don't have an
actual target, we make estimates on if fully implemented, this is what would likely happen and look around at other -- at other jurisdictions. And so we're going to shoot for the smallest safe population that we can have with, you know, courts moving as fast as they can move in order to get expedited case disposition and so on.

MS. HALLAM: Yeah. Because it does seem that we've been having a slight decline in the population so far. I know when COVID hit, and that initial reevaluation by judges was done, the population really did go down by a decent chunk.

MS. DALTON: Uh-huh.
MS. HALLAM: And, you know, I keep waiting to see the population when it's like under the 1,400 mark. That's why we keep creeping towards it and not crossing it.

MS. DALTON: Yeah.

MS. HALLAM: But, I mean, the number -- again, the numbers that I've heard proposed in the past were a fraction of that. So I was just hoping that that was still the target.

MS. DALTON: Yeah. I mean, and you know, conditions, crime, COVID, things of that
nature will impact population. I think we want to be -- also thinking about a flexible space depending on what we need. It could go smaller than that even if we don't need it. And not all of our safety and justice initiatives are fully implemented as you -- as you've noted. And so hopefully we do -- like a number of the bigger things, you know, better -- and this is really in my court, diversion, so people who are in need of behavior health needs service don't have -- you know, aren't incarcerated in order to get some of that care.

So a number of the bigger
initiatives could still create pretty significant reductions.

MS. HALLAM: Okay. And then my last thing isn't a question but a comment. It's just, you know, we talk a lot about diversion, but $I$ want to make sure that if we're trying to be state-of-the-art, state-of-the-art is true diversion, not diversion in air quotes where it requires a guilty plea or requires some sort of punishment. It's actually diverting people completely from the criminal-legal system, no charges on their record, no convictions. So I
just want to make sure that when we're -- if we're really trying to do diversion, that we do it right this time.

MS. DALTON: Yeah. Yeah. There's a number -- and you'll see in the SJC Plan there's a number of diversion initiatives. Some of them you would define as true diversion, and others that are, you know, at the time of arrest, what can we do for folks? So I think there's a continuum of diversion efforts planned.

MS. HALLAM: What in the plan would you describe as a part that is true diversion?

MS. DALTON: Yeah. We're doing a lot of work so that people -- so that people who are in crisis, you know -- as you know, a lot of people who are in crisis have no other option but to call the police, right? And so -- and things can happen from that. If you see somebody on the street who you think you're concerned about, the public may only have -- feel like they have an option of calling the police. We want to make sure our crisis options like Resolve, like our social workers to help respond, co-response models which can be true diversion, are there so that people can get the help that they need.

MS. HALLAM: Okay. And do you have any plans to work with -- you know, I've been reading a lot about the 2nd Avenue facility that is recently opened. Is there any, like, plans that you have with this RFP to kind of like work in coordination with that facility?

MS. DALTON: Yeah. I mean, I think -- I think folks are open to ideas about how those things could work together, and those can be part of what the consultants hear. But certainly, we want to think about, you know, what opportunities even in -- like, you can imagine non-carceral space in the current Allegheny County Jail where you could have services, maybe not housing, maybe it is, you know, mental health supports or workforce programs or something in the actual jail in non-carceral space and/or with other services that are nearby like new 2nd Avenue Commons.

MS. HALLAM: Okay. Yeah. I just read an article today that it said that they're already full, and so $I$ had always imagined it as, oh, it's right by the jail. This is going to be a great place for us to help folks. And, I mean, the ribbon couldn't have got cut more than like a
week or so ago, and it's already at capacity. So I don't know if you define that as a success in like should we build another or what it is, but just something $I$ want you to be mindful of.

MS. DALTON: Yeah.
MS. HALLAM: And hopefully, I will be in those stakeholder meetings to remind everybody myself.

MS. DALTON: Thank you.
MS. HALLAM: Thank you so much. JUDGE HOWSIE: Just as a point of clarification. The -- the website is actually correct in that there is representation at the bail hearings. The goal was always to have representation at the bail hearings at City Court. The majority of the crimes that occur where their bail is being set occur in the City of Pittsburgh. So there is representation at those preliminary arraignments. There are no -there typically is no representation outside of the City because a lot of times those arrests result in summons, you know, obligation by subpoena to appear in court. But when you have a person who is actually being arraigned in City Court, there were additional attorneys hired in
the Public Defender's Office to ensure that that representation occurred.

So I just wanted to say as it relates to the MacArthur Grant and the expectation, it was for providing City Court, and that has occurred.

MS. DALTON: Thank you, Judge Howsie.

CONTROLLER O'CONNOR: I'm sorry. So just real quick. Part of this is going to also be like the pretrial detention -- all of that is implied in this process, is that what we're saying?

MS. DALTON: The questions here were about the broader Safety and Justice Challenge Initiative and not about the Reimagine.

CONTROLLER O'CONNOR: Okay. So pretrial, you know, limiting arrests through that -- the process, that is part of this discussion, or that's separate, but DHS is doing that -- or is part of this conversation?

MS. DALTON: This initiative falls within a broader set of strategies to continue to reform, improve the criminal justice system --

CONTROLLER O'CONNOR: Right. So
that's part --
MS. DALTON: -- including --
CONTROLLER O'CONNOR: So that's part of the conversation that reshaping is --

MS. DALTON: Sure. And if there -if the physical plant could be arranged better to do better intake for pretrial, different types of diversion, programming, healthcare, reentry, I think, you know, those are the kinds --

CONTROLLER O'CONNOR: Okay.
MS. DALTON: -- of the ideas we want to think about for the.

CONTROLLER O'CONNOR: Yeah. I just wanted to be clear that that's what I got from it.

MS. DALTON: Yeah.
CONTROLLER O'CONNOR: Okay.
Thanks.
JUDGE HOWSIE: Yes.
MS. HALLAM: Yeah, I just want to re-correct the record -- is the update that you just gave is actually false. So if I'm understanding what you're saying right here, you're claiming that there is -- there is representation at bail hearings for anybody who
is in City Court, but that's not true. People are getting arraigned overnight, even through City Court, without proper representation.

The Office of the Public Defender and the Jail are both Allegheny County, not just city. But even if we are just talking about the city, that's not true. The bail -- coverage is sporadic. It's not overnight. There's a District Attorney overnight, but not Public Defender representation at bail hearings.

JUDGE HOWSIE: Well, it's just my understanding based upon the Director of the Public Defender's Office, a very qualified and capable --

MS. HALLAM: Big fan, uh-huh.
JUDGE HOWSIE: -- who actually
implemented the process for ensuring that the arraignments were covered. So people were hired, and those hearings are covered overnight. And there are attorneys working from the Public Defender's Office during the evening shift to cover those arraignments. There actually aren't any district attorneys there because the district attorney doesn't have any role in the arraignment hearing. So $I$ know for a fact that it's
occurring. I know for a fact it was put into
place, because I did it. So thank you.
MS. HALLAM: I'm not disputing that
they're happening at all. I just want to be
clear since you wanted to correct the record. I
just wanted to correct the record that they are
not happening, fully implemented in the city nor
the county.
JUDGE HOWSIE: Okay. Thank you.
We will now hear -- have a review
of the minutes.

Thank you, Ms. Dalton.
MS. DALTON: Thank you.
JUDGE HOWSIE: Has everyone had an
opportunity to review the minutes?
(No response.)
JUDGE HOWSIE: Is there a motion?
CONTROLLER O'CONNOR: So moved.
JUDGE HOWSIE: I'm sorry.
CONTROLLER O'CONNOR: So moved.
JUDGE HOWSIE: Is there a second?
JUDGE LAZZARA: Second.
JUDGE HOWSIE: Motion -- any
discussion?
(No response.) JUDGE HOWSIE: All in favor? (Chorus of ayes.) JUDGE HOWSIE: Any opposed? (No response.)

JUDGE HOWSIE: All right. The motion carries.

I've been informed that there are a number of Board members who are under the weather, so we're going to go a bit out of order and do the motions. Gail Moss actually asked me to inform everyone that she had a death in the family, and that is why she was unable to attend the meeting tonight.

## NEW BUSINESS

JUDGE HOWSIE: With that being said, would you like to make your motion, Ms. Hallam, regarding your request for money?

MS. HALLAM: Yes, I would. Thank you so much. So again, this is a motion that $I$ make every month. This is a motion to request money from the Incarcerated Individual Welfare Fund account to be put on the joint tablet commissary accounts of every person in the Allegheny County Jail. At the time of my drafting of this motion, there were 1,449 folks currently incarcerated in the jail. At $\$ 125$ for each person, that comes to a total cost of \$181,125. I would like to motion to approve and request a second.

JUDGE HOWSIE: Is there a second?
CONTROLLER O'CONNOR: Second.

MS. HALLAM: Thanks.
JUDGE HOWSIE: All in favor.
(Chorus of ayes.)
JUDGE HOWSIE: Any opposed?
(No response.)
JUDGE HOWSIE: Motion carries.
MS. HALLAM: One thing $I$ just want to add to that is every time $I$ go to the jail, it still seems like they're behind a month in getting the money. And so I don't know if that's Controller's office, Jail, or what, but if we could just figure that out. One month they got two on the same day. When I went on Thanksgiving, it was -- they still hadn't gotten November's. So what was that, three and a half weeks after we approved it? So if we could just try and make that a little more timely, whoever's responsibility that is, $I$ would appreciate it.

JUDGE HOWSIE: Is there another motion?

MS. HALLAM: Yeah. So the next one, this one actually came out of my visit, which I'm going to talk about -- I guess we are just doing the motions, not all of New Business right now -- but my last visit on Thanksgiving, I talked to incarcerated folks, and a couple of them had asked me how they could follow along with our meetings. I know we had discussed before about streaming it to them and they seemed like it provided logistical problems, but what they did point out to me is that they couldn't remember if it was February, March, or April, but one of those three months of this year they actually did get the minutes put on their tablet from our jail Board meeting.

And so this is a motion to make PDFs of Jail Oversight Board Meeting Minutes from January 2022 and forward available at no cost to the incarcerated individuals on the jail-provided tablets. Meeting minutes will be posted on the tablets each month within seven days of the minutes being approved by us, which we just did now.

So I would like to make a motion to
approve and request a second.
MS. KLEIN: Are we having discussion?

MS. HALLAM: After we get the second is the time for discussion.

MS. KLEIN: Sorry.
CONTROLLER O'CONNOR: So moved.
JUDGE LAZZARA: You seconded?
MS. HALLAM: You're the second, Cory. Sorry.

CONTROLLER O'CONNOR: Oh, I thought you said -- Second.

JUDGE HOWSIE: Any discussion?
MS. KLEIN: I have a question. JUDGE HOWSIE: Ms. Klein.

MS. KLEIN: Do we know whether
there is -- that capability exists now that the tablets can get a PDF.

MS. HALLAM: Yes. I spoke with the tablet manufacturer, and also they had them once before, and also the jail routinely puts documents for them as they referenced to us in the past, informational materials on there in the form of a PDF?

CONTROLLER O'CONNOR: And $I$ know
that -- oh, sorry. But our office can also add to our website already, but prior meeting minutes. As the Secretary of the Board, we can do all of that, and try to actually form something different internally so that if you go on our website, you can get up-to-date information. So we're working on that internally as the Secretary. If we can do it internally from the Controller's Office, that can be added to the link as well.

MS. HALLAM: What $I$ would say, Controller O'Connor is -- so they don't actually have access to like the World Wide Web browser.

CONTROLLER O'CONNOR: No, no, on an app, on an app.

MS. HALLAM: Oh, on an app?
CONTROLLER O'CONNOR: Yeah.
MS. HALLAM: Oh, tell me about that.

CONTROLLER O'CONNOR: Well, we're trying to figure it out internally.

MS. HALLAM: Oh, okay.
CONTROLLER O'CONNOR: But the
thought would be to take all prior audits, all public information, so nothing is security, no issues there.

MS. HALLAM: Uh-huh.

CONTROLLER O'CONNOR: Onto that link so that if this occurs, that can all be there as well.

MS. HALLAM: That is cool. I hope to see that in the future.

CONTROLLER O'CONNOR: Yeah.

MS. HALLAM: Yeah, but I mean, I know that these are created -- you know, this is probably a PDF printed out right here.

Again, it's free reading material. It's all public information. Nothing is ever discussed here that concerns the safety or security of the jail. We know because the Warden often cites that and takes us into Executive Session. That's not included in meeting minutes. So this is, again, only publicly available information. I think it's only fair, you know? Like, we're talking about people behind their back. Let's let them hear what we're saying about it. And I think it would help improve the conditions at the jail.

MR. PILARSKI: My question would be do we also get them back within seven days? I knee sometimes it takes time.

MS. HALLAM: This is within seven days of approval.

MR. PILARSKI: Okay.
CONTROLLER O'CONNOR: Approval, okay.

MR. PILARSKI: Okay. I gotcha.
JUDGE LAZZARA: That was one of my questions, too, where it says within seven days.

MS. HALLAM: I actually thought of you, Judge Lazzara, when $I$ wrote that because I knew that was going to be a question.

MR. O'CONNOR: And then --
MS. HALLAM: No, it's okay. So sometimes, I mean, we're a month or so behind. I tell -- you know, that sucks, but I totally understand that happens. This is -- we just voted to approve the meeting minutes, so within seven days, this PDF would go online.

MR. O'CONNOR: And then a little more detail on ours. If we can do it internally and we're working on it, but to also give information where they can find necessary help, other programs that are out there that we talk about but isn't readily available.

So hopefully, it can all be in a link, but we'll keep everybody posted on that.

MS. HALLAM: Yeah. Yeah, I would love to help with that as well, as that comes along. This is kind of -- you know, we talked about bridges last meeting. This is kind of a bridge until we have all of that available. JUDGE HOWSIE: Miss Blythe.

DEPUTY WARDEN TOMA: Excuse me. So there are statements of seven days from approval. Is it posted on the Controller's website within -- how quickly after approval because that is where we have gotten them from in the past?

MR. O'CONNOR: When minutes are proposed. Yeah, I mean, once everything is done, we'll post everything.

DEPUTY WARDEN TOMA: So that's my only -- so can --

MS. HALLAM: I get your question. She --

DEPUTY WARDEN TOMA: So I propose to --

MR. PILARSKI: I didn't mean to interrupt. You guys pull it out of there. You guys pull it from his website, is what you're saying?

DEPUTY WARDEN TOMA: Correct. So rather than approval, from posting to the public website, because we don't get the minutes, or at least $I$ don't get the minutes.

MS. HALLAM: Corey, is that something you guys can commit to a timeline?

MR. O'CONNOR: Yeah, we'll --
MS. HALLAM: I don't want to add anything more, you know, burden?

MR. O'CONNOR: Yes, I mean, Jen gets all of that together for us. So I -- it's hard -- I mean, she works for hours to get all this done. But we'll get it as soon as we possibly can. We'll get you a timeframe that we can be specific.

DEPUTY WARDEN TOMA: Because currently, I'm not on any e-mail distribution from the Jail Oversight Board so...

MS. HALLAM: We don't get any e-mails distributed that don't come from you guys.

MR. O'CONNOR: No. When we get timelines and everything for all of this, we'll let you know. And then as I said, the other --

MS. HALLAM: You're comfortable with seven?

MR. O'CONNOR: -- the other additional stuff we're talking on, talking about, we'll show it to you as well.

DEPUTY WARDEN TOMA: And then the only other statement is we have never put a document that large, so $I$ don't know if we have a size restriction for the mechanism of what we have been currently using.

MS. HALLAM: The way it was explained to me is that the storage and the limited number of things that are on there now, that that shouldn't be a problem. I specifically asked about that.

DEPUTY WARDEN TOMA: So that's with the tablet.

MS. HALLAM: With the tablets, the specific tablet.

DEPUTY WARDEN TOMA: Right. You're talking about the physical tablet, and you talked to the manufacturer, I'm assuming?

MS. HALLAM: Correct.

DEPUTY WARDEN TOMA: So we work
with a vendor, and there's other applications --
and like even our E-library and other things, so we may have a physical limitation of what we can upload -- whether or not it has the storage capacity, a limitation of what we can upload?

MS. HALLAM: Sure. So if it
becomes an issue after a few months of posting a document like this, we can readjust if you bring that to our attention so...

We have a motion and a second.
JUDGE HOWSIE: All in favor.
(Chorus of ayes.)
JUDGE HOWSIE: Any opposed?
(No response.)
JUDGE HOWSIE: Motion carries.
MS. HALLAM: Thank you all very
much.

## WARDEN'S REPORT

JUDGE HOWSIE: Now, with that being said, we will now have the Warden's report.

WARDEN HARPER: Good afternoon Board. Good afternoon Board.

JUDGE HOWSIE: Good afternoon.
WARDEN HARPER: The first thing I
would like to report on is voting at the
Allegheny County Jail at the last election, and 45 incarcerated individuals were able to vote in the last election.

We still have not received the report from the NCCHC, so as soon as we receive that report, $I$ will make sure that it's passed on to the Jail Oversight Board.

The first thing $I$ want to talk about in the Warden's Report is reentry services at that time Allegheny County Jail.

The Reentry Service Department added an additional training opportunity for incarcerated individuals that began this week. With funding from the Partner 4 Work, the reentry center is holding six-day asbestos removal certification courses this week and next week at the jail. There has been significant interest in this program, with 37 applicants. The first class had 17 participants, but the reentry department hopes to host a second class based on the significant interest.

The department also hosted its most recent graduation for reentry services in early November. A total of 145 graduates received certifications from parenting, relationships, and thinking for change classes. The next cycle of classes will begin on November 21st with 216 participants.

Inmate programs. In conjunction with the educational partners, the Allegheny Intermediate Unit, the jail is developing a behavior inclusion system for juveniles at the Allegheny County Jail while in school. The AIU adult education program also recently added a new instructor, Mark Sepi, which we hope will allow us to increase contact with our maximum security incarcerated population.

Reintegrative services. With the support of our partnership with Three Rivers Youth and the development of human resources, the Allegheny County Jail reintegrative service department will now be submitting applications for medical assistant benefits for individuals who wish to participate upon their release from incarceration. This will enable individuals released from jail the opportunity for more immediate medical treatment services.

Outside visits. Several different entities visited the jail this past month. The Washington County Jail staff toured the jail and the Renewal Center on November 9th, as it looked to expand its alternative housing program. The jail also brought the Police Officer Support Team to the jail on November 9th. Post is a peer network of police officers who provide support for all members of the law enforcement community who might be suffering from stress or stress-related difficulties. POST was on-site for any jail employee who desired to speak with them in a confidential setting, and help was available through the organization by phone 24 hours a day, 7 days a week.

Also, six members of the County Council toured our facility on November 16 th. Lastly, on November 22 nd, Rethinking of the Jail Team also toured the facility.

Discharge and Release Center. The Discharge and Release Center saw 172 individuals in the month of November. The DRC made 23 referrals for food assistance; 20 referrals for Hope After Care Services; 9 for career services, and 7 for AHN's River Clinic Services. The DRC also distributed 174 bus passes and 35 boxes of Narcan.

Training. Jail employees continue
to participate in verbal deescalation and communication training. So far, 206 jail employees have completed this training process. Employees of the month. We would like to congratulate our employees for the month of November. The Jail's Welcoming Committee selected AIU educator Jamie Grimes and substance abuse counselor Rachel Stat for this month's honor.

Facilities. On Saturday, November $19 t h$, the heating system issue at the Allegheny County Jail was identified. Correctional officers immediately issued extra blankets to the incarcerated individuals on 3-Bravo where the temperature complaints originated. Officers conducted additional checks on other pods and issued extra blankets when requested.

The county's Facility Department began addressing the heating concerns on Saturday when they were reported. All issues with the system were resolved by Tuesday. There are no ongoing problems, and full heat functionality has been restored to the pods. The incident did not require moving incarcerated individuals to different pods because it was determined that the repairs could be made in a timely fashion. Temperatures continue to be monitored inside the facility to ensure no one's health or safety is compromised. Jail administration has ordered 1,000 additional blankets for use on the housing units in the event of any future issues.

On Monday, November 28th, the jail was advised of a water main break at the Renewal Center. The Pittsburgh Water Authority cut the water to make repairs, and the Renewal Center made arrangements for portable water for drinking and cooking. It was restored later that day with no more reported issues. Our Chaplaincy Department. The holiday season is a busy time for our Chaplaincy Department, and we've also been increasing the number of volunteers returning and resuming the programming we offer with your chaplain's department. So I've asked our director of the Chaplains Department, Reverend Charissa Howe, to give her special presentation about the Foundation of Hope, including the -- including the AA classes and NA classes, and the role the chaplain's department and prerelease services play in preparing our incarcerated population for release.

So now, I would like to introduce to you Reverend Charissa Howe.

REVEREND HOWE: Good evening. As Warden Harper said, I'm Reverend Charissa Howe. I'm the Director of Chaplaincy at the Allegheny County Jail. The ACJ chaplaincy department is a program within the Foundation of Hope, which you may have heard mentioned a few times in the past here in these meetings. I might be a new face to many of you because $I$ came on staff with Hope in early 2021 in the height of COVID. So everything has been a little bit wonky.

I'm a Presbyterian minister and had been serving as a volunteer with several Hope programs at the ACJ since 2014 until the time I left church ministry to come on staff.

I'm often asked why I made the move from the parish to the jail. It seems like an interesting transition, and for me, the answer is found in Matthew 25 where Jesus issues a clear directive to Christians to care for the sick, feed the hungry, and visit the prisoner. There's something very holy and precious about the ministry that happened in chaplaincy at the ACJ, and so when $I$ saw a staff position open up with Hope, I jumped at the chance.

There are a few callings in this world in which you have the opportunity to sit and to listen and to non-judgmentally hold the stories of those who are at their lowest point in life, those who need a presence showing up for them day after day, week after week, and year after year. One thing I've learned in my years of showing up at the ACJ, first as a volunteer and now as staff, is that the greatest gift you can give a person is your presence. So I'm honored to serve with an incredible staff of chaplains, administrative staff, volunteers, and seminarians who are also dedicated to this work.

The Foundation of Hope serves individuals currently incarcerated at the Allegheny County Jail, those who have been released from the ACJ, or any other correctional facility, as well as those who are at risk for being incarcerated. Our two community-based departments are our aftercare program for those who have been incarcerated, and the diversion program that aims to keep first-time, non-violent
offenders out of the carceral system. We receive referrals to the diversion program through local schools and police, as well as other community partners. It's a voluntary preventative program. Most of our referrals to the aftercare program come from our programs in the ACJ and through word of mouth.

Inside the $A C J$, we have chaplaincy, which sees to the spiritual needs of the population, and prerelease, which offers spirituality based educational programming on 2-C, which is affectionately known as the Hope Pod. We are committed to providing holistic care to those at risk of, in the midst of, and reentering from incarceration.

In addition to the more
spiritual-sounding chaplaincy things that we do in the Chaplaincy office, like prayer services and spiritual counseling, there are some very concrete things that Hope Chaplaincy does in the ACJ to provide hope, assistance, and community connection to the individuals we serve.

Each year we provide hundreds of copies of Bibles, Qurans, and other scriptures to the individuals at the ACJ. We provide care
packages to indigent individuals within the facility. Those care packages include extra hygiene items, paper and pen, combs, and other things. We provide reading glasses, denture cleaning tabs, and more to those who need them.

All through COVID, we have made sure that there are video worship and prayer services available on the pods for individuals to watch, while faith communities on the outside were also turning to video and online services. Our staff chaplains work tirelessly to fill the gaps left when our volunteers could not come in due to the pandemic.

As Warden Harper mentioned, we are currently rebuilding our in-person programming with staff-led services and study groups. Just this month, in November, we were able to start holding in-person Bible and Quran study groups on the pods again. Since May, our volunteer chaplains have been back in the building for one-on-one spiritual counseling with individuals, as well as weekly rounds on every pod.

Just today, just this morning, we passed out holiday greeting cards to every incarcerated individual in the facility. They're each given two cards that can be mailed to their loved ones at the chaplaincy office's expense.

Next week we will be packing 1,800
holiday gifts that include thermal shirts, hygiene items, paper and pens, candy, and more. These gifts will be distributed to every individual in the facility two weeks from now, and we keep the extras on hand for those who are brought in after the distribution date. This is a very difficult time of year for the incarcerated, and this yearly gift is a bright spot for those who are struggling this holiday season. In fact, I've noticed this week in the facility on the pods, word is getting around, and we're being asked when those packages are coming. And so people really look forward to that every year.

Our prerelease program has
reinstated classes on the Hope pod, on 2-C, and on November 11 th, they had their first in-person graduation since the pandemic began. It was a huge celebration. It was a proud moment for all of the individuals who completed the program. The classes in prerelease include parenting, spiritual formations, $12-$ step programming,
overcoming stinking thinking, anger management, trauma recovery, yoga, and more.

Our new prerelease director,
Liz Lapore, came to us this year after over 30 years of programming experience at the Holy Family Institute, and she has been an incredible addition to the team. We're very excited about what she brings to the table.

Our aftercare and diversion programs are in large part grant funded, including some grants that have allowed us to increase our staff of caseworkers, peer support specialists, and more. All of our programs within Hope are currently fully staffed, and we hope to continue growing.

Our diversion program serves both youth and adults. The youth diversion program works with youth ages 9 to 18 who are non-violent, or have committed a low to medium offense. We currently work in the North Side Zone 1, Zone 2, the Hill District, and East Liberty, which is Zone 5. These services include but are not limited to linking participants to local agencies for mental health and drug and alcohol services, assisting and providing support with educational services, such as 504 plans, and IEPs, and court proceedings involving juvenile court.

The adult diversion program provides intensive case management, individuals with high levels of need, with a focus on people who use substances. This program is designed to accept referrals from the community, as well as law enforcement to reduce harm for community members with unmet behavioral health and human service needs, ancillary to substance use. As such, the Hope program offers proactive adult diversion, helping to prevent individuals at risk of incarceration and overdose from ever encountering police, or entering and, in some cases reentering, the criminal justice system.

Our aftercare program has served over 1,000 returning citizens in 2022, providing bus and fuel cards, clothing, computer labs, employment counseling, food, housing counseling, reentry support groups, and more.

The Perk Positive Initiative to Reinforce Change Group meets every Tuesday evening in our North Side office, as well as on Zoom, and is open to anyone who has ever been
incarcerated in any facility for any length of time, and those who are supporting them.

The recidivism rate of Hope aftercare participants is 37 percent compared to the 65 percent national recidivism rate.

The Foundation of Hope programs rely heavily on volunteer support and community donations, both financial and in kind, and we have a deep desire to build relationships with faith communities on the outside. So far in 2022, over 1,700 volunteer hours have helped to keep our programs going, and that is in a year with limited and rebuilding volunteer services.

So I'm going to toss in a shameless plug here for anyone that's here or watching. Any faith communities that would like more information on how to volunteer or donate are invited to connect with us for more information. I'm always happy to answer questions for those who would like to know how to be a part of this work, and you can find us at Foundationof Hope.org.

MS. HALLAM: I have some questions.
REVEREND HOWE: Yeah.
MS. HALLAM: Yeah, before you walk away. Okay. Thank you for coming, first of all. REVEREND HOWE: Of course.

MS. HALLAM: I'm familiar with your program and the organization, and thank you.

So the first thing I wanted to say was about -- you talked about the recidivism rate of folks who were in -- I guess, it's the Hope Pod. Is that what it is, people who are on the Hope Pod, or was that just the reentry?

REVEREND HOWE: That was just aftercare, correct.

MS. HALLAM: For aftercare.

REVEREND HOWE: I don't have the numbers for prerelease, but $I$ could get them.

MS. HALLAM: Yeah, could you, because I'm really interested to see -- like I understand the national average. I didn't know if Allegheny County Jail or anyone in the county tracked overall recidivism rates at the Allegheny County Jail. I'd like to see the comparisons between the Hope Pod aftercare services and the county in general just to kind of compare those two. So that would be really, really helpful.

The next question is for the aftercare services or participation on the Hope

Pod, is there anybody who is court-ordered to that?

REVEREND HOWE: No, they are voluntary based.

MS. HALLAM: Okay. And what are -who is ineligible?

REVEREND HOWE: Who is ineligible?
MS. HALLAM: Uh-huh.
REVEREND HOWE: I do not have the exact parameters in front of me, but $I$ know there are some -- for aftercare, there are no -- if have been incarcerated under any circumstances, you can participate in aftercare.

For prerelease there are some stipulations. You can only have minimum and medium security folks on the pod and things like that, and $I$ can get you that information as well.

MS. HALLAM: Okay. Yeah. I would really appreciate that. What do volunteers do with your organization if somebody comes on as a volunteer, because $I$ saw some people's like eyes perk up out there whenever you said that. I know we have a lot of members from the faith community who, you know, no pun intended, religiously come to these meetings. But -- I know. That was
funny. It just came to me. Anyway -- sorry. And so I know that there's a lot of folks here who are really interested. Maybe if you could detail what that looks like if you're a volunteer?

REVEREND HOWE: Uh-huh. We have a lot of ways people can volunteer. There are mentors that work one-on-one with people through our aftercare program. We do always need support at those perk meetings, those Tuesday night meetings. We have volunteers that come in and teach prerelease classes. And so those, like I said, there's a wide range of different classes. That's one of the programs that $I$ came in as a volunteer as and wound up eventually working for the program.

So in addition, in Chaplaincy, we have volunteer chaplains, mostly clergy and elders in their faith communities who do some of the pastoral counseling, study groups, scripture study groups. We also have outside spiritual advisors who sometimes come in to meet with people one-on-one, as well as worship teams. They are not in the building at this time just because we're still rebuilding that volunteer base and figuring out what the needs are with the new lower population. But that is also another opportunity is to help lead prayer and worship services.

MS. HALLAM: Okay. And what
about -- is the entire -- what about people who are not spiritual?

REVEREND HOWE: We'll see anybody. I have met with people all over -- all over the map in regards to that, that care and counseling. And so our staff is dedicated to being interfaith. We do not specify that you have to be spiritual necessarily. If you need someone to talk through some grief with that maybe doesn't qualify as a mental health need, but you just need someone's ear, we're happy to meet with anyone at any time.

MS. HALLAM: And do you have a waitlist for your services of people who are incarcerated currently?

REVEREND HOWE: No.
MS. HALLAM: Because I know -- I'm just, you know, thinking out loud, but you are offering counseling services. The people in the jail are not receiving counseling services -- to
the extent that we wish, and they wish that they could because of all the vacant mental health staff positions -- and so I'm just wondering if there could be more of an overlap if you're providing the kind of services that we're kind of desperate for?

REVEREND HOWE: So we do not have therapists on staff in chaplaincy, and so it really is just like a pastoral care and listening. We're not counselors, or therapists, or psychiatrists in any way, but we do do some cross referral with mental health services if they have someone that doesn't quite, you know, elevate to needing a therapist, they just need, you know, sort of a friendly face to talk to.

MS. HALLAM: Oh, and how do they go about like -- let's say I'm incarcerated at the ACJ. How do I go about just having somebody to talk to, you know?

REVEREND HOWE: There's a couple of different ways that folks get connected with us. Some put in requests on the tablets. Some write us handwritten requests. Sometimes we get notice from an officer, hey, so-and-so could really use someone to talk to. Can you send a chaplain?

And then we also, like I mentioned, we have at least weekly rounds on every -- on every pod where a staff or volunteer chaplain will be there, and so word just kind of gets out that one of the chaplains is on the pod.

MS. HALLAM: Okay. And did you ever consider, like -- I know when I hear chaplain, $I$ immediately think like religion. And so I'm just thinking about people, you know, who don't observe any faith or any spirituality and want to make sure that they're not maybe -- I mean, for lack of a better term, being scared away from really awesome services that could be being offered because that like jumps. Have you ever like thought about the title and -- of chaplain or like if we could -- I don't want to like change your job. I'm just saying like, you know, to make it more accessible for people of -not just all faiths, but also people who don't observe any faith?

REVEREND HOWE: Uh-huh. Yeah, and that's a really interesting question. And one thing that $I$ will say is that we don't all wear collars on the pod. You know, we don't all dress like our Imam does or anything like that. And so especially when some of those volunteers come on the pod, I do think that they are a little more approachable in that way too.

MS. HALLAM: Okay. That's awesome. And then the other thing is why isn't the -- isn't like the Hope Pod expanded onto more pods? You know, like is there not a need? It sounds like if your recidivism rate is half of the national average, that, like, at least something is going right. And how could we provide the same services that it seems like a small subsection within the jail -- I get it seems like there's a lot of people outside the jail being served. But, you know, I've been on the pods, and I know it's a lower population on the Hope Pods than any of the other pods in the jail. Is it, you know, staffing needs? Is it financial needs? Like what -- what would you need in order to expand it, and would those services be utilized if you were to expand?

REVEREND HOWE: Those are all really great questions that $I$ can't necessarily answer, I guess, as fully as you want right now. MS. HALLAM: Okay.

REVEREND HOWE: One of the reasons
is simply because it is a fairly transient population, and we have a ten-week program for the Hope -- for the Hope program. And so that is -- I'm sure that does play into it. We are just rebuilding things after COVID as well, and I'm sure -- you know, $I$ could connect you with -with our new Prerelease Director to kind of talk through those things too. But, I mean, we would love to see $2-C$ filled and then some.

MS. HALLAM: Yeah. That's kind of what I'm wondering too. And then $I$ guess my -- I promise my last question -- is since it's a ten-week program, how -- I guess one, how often are you admitting people to the program who aren't finishing it because they're getting released?

Two, does participation in the program -- because $I$ know when $I$ was in jail, it was always like $I$ don't want to do that program or that class -- not this one specifically -- but because then $I$ have to finish it, and then if I'm going to get out, I'm not going to get out in time because I have to finish this program. So I guess like three-part question. How many people start the Hope Pod and can't finish it? How
many -- are you only taking people who are servicing sentences or people who are stuck there until their trial plays out? How are you kind of determining that so that people aren't leaving before the program is over?

REVEREND HOWE: Okay. Was there a third question?

MS. HALLAM: No. I think I combined two into one, so $I$ have two.

REVEREND HOWE: Okay. No problem. So we do have people that don't finish the program. They can still come in even if they're not sure what their timeline is, and I think they still get a lot out of the classes in the program even if they don't get that completion certificate at the end of it. It does tend to be kind of a rolling thing -- participation on that pod. And people are moved on weekly. So it's constantly being repopulated. And it's not only those who have been sentenced.

MS. HALLAM: Okay.
REVEREND HOWE: Yeah.
MS. HALLAM: Okay, but -- okay.
That's cool. That's awesome. Thank you so much.
REVEREND HOWE: Yep. questions?

JUDGE HOWSIE: Any additional

JUDGE LAZZARA: No. I just want to thank you for the work that you do, because $I$ see the people that come into my courtrooms with their Hope certificates, and they absolutely want to share the fact that they have completed the program, and they are, $I$ think, in much better ways prepared to return to the communities because they've had those learning experiences.

We don't sentence people. It is a voluntary thing, but $I$ certainly encourage all of my folks, you know, to make sure that they do the Hope Pod because $I$ think it is such a valuable -a valuable experience for them.

And just so you know, I've had people, Bethany, who have chosen to stay in the Allegheny County Jail to finish the last few weeks of the Hope Pod before they leave, and that is their request because they want to stay. I'm like ready to go. You're done in 72 hours. They're like can we please delay it for a couple of weeks to finish it? So I'm sure you've heard those people too, and it's because they really want those -- those last couple of weeks, and
they want to be able to say that they've completed it.

And they really -- you really do fantastic work. So I want to thank you very much for the work that you do.

REVEREND HOWE: Thank you.
JUDGE HOWSIE: Ms. Hallam.
MS. HALLAM: Yeah, I did forget a
question. It wasn't one of the three $I$ was ordinarily referencing, but $I$ just know that in previous meetings, we had heard when we have been talking a lot about books, which you'll hear like later in the meeting, we have been talking a lot about books. And $I$ know that the Foundation of Hope, the chaplain's office have been referenced when it comes to certain things about books. And I can't remember now exactly what was said -- if anyone else does -- but $I$ know you're not like on the approval process of who gets books and who doesn't, but do people get books through you? Are you the keeper of the books? What is your role in books in the Allegheny County Jail?

REVEREND HOWE: I am not the
bookkeeper. We do have limited supplies of like spiritual, self-help-type readings, so Purpose

Driven Life. Like I said, we have hundreds of copies of Bibles and Qurans and Holy Piby. You name it, we've got all those scriptures and things like that. So we do have some -- some books that we are able to give to the folks within the -- within the facility, and we're part of the review process that is being instated. MS. HALLAM: Oh.

REVEREND HOWE: But we do not oversee the library or anything like that. MS. HALLAM: Okay. So you're part of the -- the review process of determining what books can come into the facility and which can't, like...

REVEREND HOWE: Because sometimes books that people order are religious in nature, and so they want to have someone, yeah, with that background to be a part of that process.

MS. HALLAM: Okay. Is this like a committee that you're on?

REVEREND HOWE: I'm going to let -I'm going to let Deputy Toma speak to that later. MS. HALLAM: Okay. I just wanted to specifically ask about your experience and your role on it. If you could speak to your specific experience and your role on this group, because I know we'll hear generally about it later, but I'd like to talk to somebody who is on it.

REVEREND HOWE: Right. Yeah. I
mean it's -- you know, if something comes to, then a committee would be called, but yeah.

MS. HALLAM: And how many times would you say you participated in that process?

REVEREND HOWE: I'd -- I don't know that right now. I don't know a number.

MS. HALLAM: Have you ever participated in that process yet?

REVEREND HOWE: Yes.
MS. HALLAM: You have. Would you say it's like dozens or like a couple?

REVEREND HOWE: We're -- it's a newly forming committee at this point that I've been called onto. I can't speak to the past before $I$ was on it.

MS. HALLAM: Oh, it's forming? It's not formed yet?

REVEREND HOWE: I'm recently new on it. I don't know about the history of it.

MS. HALLAM: Okay. Okay. That's
what $I$ was asking.

REVEREND HOWE: Yeah.

MS. HALLAM: But you have, even though you're new on it, you've already been a part of the process?

REVEREND HOWE: I've been -- I've been pulled in to be part of the process. Yes, I've been asked to be one of the people that are available for that.

MS. HALLAM: Okay. And, I mean, are we talking like five titles you've reviewed so far? I'm just trying to get an idea of how long this has been going on and how you feel it's working.

REVEREND HOWE: I don't have -- I don't have the numbers for how many have been reviewed by the group.

MS. HALLAM: Okay. All right.
Thank you very much.

JUDGE HOWSIE: I just wanted to say thank you for your efforts. It's impactful, so keep up the good work, and thank you.

REVEREND HOWE: Thank you.
JUDGE HOWSIE: Anyone else?
(No response.) JUDGE HOWSIE: Thank you very much. Warden?

WARDEN HARPER: Your Honor, that's all I have for the Warden's Report.

JUDGE HOWSIE: Any questions for the Warden?

CONTROLLER O'CONNOR: Yes. Just -sorry, just real quick. On the inspection report update, so they don't have a final report, but if they have drafts are we able to get those? Like if they've done Section 1, Section -- I'm just using general terms, but is that available to us as they go through that, like a draft of the first report, anything like that?

WARDEN HARPER: We don't give drafts of any documents.

CONTROLLER O'CONNOR: Okay.
WARDEN HARPER: So as soon as the final report is available, I will get it to the Board.

MR. O'CONNOR: So their initial reports, that's all -- they just do an internal, and then they give you a final report? Or do they do -- is there stages of the report, or it's just a final report, and that's it?

WARDEN HARPER: There's drafts, but we're waiting for the final.

MR. O'CONNOR: Okay.

JUDGE HOWSIE: Ms. Hallam.

MS. HALLAM: Yes. I have some questions.

So the first question that actually
like jumped off of the last part of your presentation, are all -- are religious groups allowed to do communal prayer in the jail? Like, for example, people who practice Muslim faith, are they allowed to do their communal prayers in the jail? How does the jail or in coordination with the Hope Foundation, anything like that, facilitate that?

WARDEN HARPER: On the pod.

MS. HALLAM: It takes place on the pod, in the general area of the pod?

WARDEN HARPER: It takes place on the pod. Yes, ma'am.

MS. HALLAM: And how often does that happen, or is it just kind of like you leave it up to them to do during rec time?

JUDGE HOWSIE: What religious group?

WARDEN HARPER: What religious group are you talking about in particular?

MS. HALLAM: I'm talking
specifically about a communal prayer for Muslim-practicing folks.

WARDEN HARPER: Right now, the Muslims practice their religion in communal on the pod. We don't bring them together as we used to before COVID.

MS. HALLAM: Okay. So are -- is that something that's planning to come back, because it seemed to me like most of the COVID mitigation efforts, like they go away, and that doesn't seem like something that has come back. WARDEN HARPER: We just received some new updated guidelines from the CDC, and Dr. Brinkman will talk about that in the next step. But right now, we have not allowed the Muslim community to get together, or any communities to get together, mixing up the pods because of the COVID mitigation.

MS. HALLAM: Okay. Next question. I got a whole stack here for you. Okay. So I'm just going to -- oh, first thing to mention, like it was -- I definitely do appreciate having the
chaplain here to speak tonight. I definitely appreciate having Ms. Dalton here to speak about the RFP, but if this is going to be like one of those things where you guys like bring people to give us presentations, again, would really like to hear from the dietician, would really like to hear from the medical director, would really like to talk to the exterminator. Like we ask a lot of information about various things at the jail that is -- and we're told we need to hear that from someone else. And so if you're able to bring those folks in, I'm just wondering if any effort has been made to bring any of those other people we've asked to speak to in as well?

WARDEN HARPER: I think the Judge has indicated to the Board that Summit, or the vendor -- the food vendor was willing to talk to you guys, so we -- he's -- the Judge has already talked about that.

Also, the medical director, $I$ had to get approval -- he has to get approval from our partner, AHN, to actually come and talk to the Board, so we will ask again. And who -- the dietician?

MS. HALLAM: You said dietician.

|  | 124 |
| :---: | :---: |
| 1 | Exterminator. |
| 2 | WARDEN HARPER: Exterminator, I can |
| 3 | ask. |
| 4 | MS. HALLAM: Yes, can you? Or |
| 5 | actually, do you know the exterminator's name, |
| 6 | what company it is? |
| 7 | WARDEN HARPER: Fort Pitt. |
| 8 | MS. HALLAM: Fort Pitt, like the |
| 9 | bridge? |
| 10 | WARDEN HARPER: Fort Pitt. |
| 11 | MS. HALLAM: Okay. Cool. Thanks. |
| 12 | Okay. Next question is -- so my |
| 13 | handwriting sucks so bad. Oh, you talked about |
| 14 | when we were talking about the heat going out. |
| 15 | Okay, I'm like super mad about that, and I'm |
| 16 | going to try to cool it while I talk about it |
| 17 | just to not upset anyone's feelings. But I found |
| 18 | out about it on Facebook, man. We have talked |
| 19 | about this so many times how serious issues are |
| 20 | happening in the jail, and I bet most of yinz |
| 21 | didn't even know about it until you saw it on the |
| 22 | news, or maybe you found out about it today. I |
| 23 | found out about it on Facebook that the jail |
| 24 | didn't have heat on certain pods for three whole |
| 25 | days. I'm mad about that. This entire Board has |

expressed serious frustration about finding out about huge issues in the jail from Facebook, from the news. Hell, I got a tweet from the ACJ comms account before $I$ got an e-mail from you letting me know that it happened. That's the only confirmation $I$ got, and it was because somebody sent it to me on Twitter. It wasn't like he reached out. It was like, hey, by the way, I'm using Twitter to let you know. No, it was Facebook posts. And the only reason there were even Facebook posts was because incarcerated people from the pod thought to reach out and hope that someone would listen and do something about it.

So can you please explain to me how many other issues like this have happened, and we didn't get a letter about it, we didn't have a Facebook post about it, your comms act did not Tweet about it? How many other times have there been health violations like not having heat in the middle of winter for three whole days?

WARDEN HARPER: Ms. Hallam, there's no way that $I$ can talk about how many other times there's been issues in the jail but I -- what I will tell you is this. We will make sure that in
the future we communicate information like that through our Communications Department.

MS. HALLAM: To the Board?
WARDEN HARPER: We can do that, ma'am. Yes, ma'am.

MS. HALLAM: Because you have told us this many times before that you're going to let us know about issues, when people are taken to the hospital. Still haven't gotten a single notification of that. When the heat is out, when there's emergency bags being given out, bag lunches because the food is not there, because you're out of the items. None of these things are being told to us. When there is an issue at the jail, we need to be told.

I spoke with representation for a woman the other day who -- last month -- a woman attempted suicide, and another woman beat her face into a cell wall daily because they were being deprived rec and other privileges thanks to the tier system, which $I$ know we're going to get to that later. But why can't we get an e-mail about an attempted suicide? Why can't we get an e-mail about heat being out? Why did -- the same thumbs that typed it on Twitter couldn't type it
in an e-mail inbox and send it to us? Can you just tell me why that is? I'm trying to be chill about it, but $I$ am very upset because every meeting, you keep coming here and telling us that we're going to get this information. I didn't make that up. You all can verify that we have been told we would be notified of these things. I'm mad. And you can smirk at me all you want, but can you please give me an answer, and this is where $I$ will rest the issue, why you have not -you did not notify us about no heat in the jail for three days and that you will never, ever, ever not do that again.

WARDEN HARPER: We will notify the Board, and our Communications Department will Tweet heating issues going forward, Ms. Hallam.

MS. HALLAM: Cool. Thank you. The next thing is, again, related to that. But you talked about not moving -- that you didn't move them to a new pod. Like if I didn't have heat in my house, I'd go stay at somebody else's house. The incarcerated population --

JUDGE LAZZARA: Ms. Hallam, just
one question. Can $I$ ask how you're going to notify us?

MS. HALLAM: Yeah.

JUDGE LAZZARA: Because -- because personally, I don't Tweet. I don't do Facebook. I mean, it's not a good thing for judges to do that kind of stuff. And so I would like to know just how we're going to be notified, because if you're going to use those sort of social media accounts -- you know, I don't know about Judge Howsie, but $I$ certainly don't do any of those, so an e-mail would be awesome.

JUDGE HOWSIE: Can we have an e-mail when something like that happens?

DEPUTY WARDEN TOMA: When the communications -- we'll have them send an e-mail as well as when they're doing their normal social media.

JUDGE LAZZARA: Yeah. Thank you. I'd appreciate that.

DEPUTY WARDEN TOMA: I'll give that directive to him.

MS. HALLAM: Thank you. And not just heat, be any serious issue. This is our job.

WARDEN HARPER: Hold, hold, hold. So the Board wants to know about every serious issue?

MS. HALLAM: Yes.

WARDEN HARPER: E-mail.

MS. HALLAM: Yes.

WARDEN HARPER: Okay.

MS. HALLAM: Man, I can't believe you weren't doing that this whole time.

Next, you talked about how you assumed that the issue would be fixed in a timely fashion. That was your words, "timely fashion," and so that's why you didn't move anyone. I don't really think being without heat in the jail, which we know is already -- the temperature is all out of whack, being without heat for three days is not a timely fashion. Why with all the empty pods that we have, where no additional staff is needed -- we're not asking you to open more pods in addition but to just move one pod for the next, why did you not just move them?

WARDEN HARPER: Ms. Hallam, temperatures was taken on the pod, and we made the determination that the inmates did not need to be moved. So therefore, they were given additional blankets. The temperature was appropriate enough to keep them on the pod. So
we made that decision, and it was a good decision made by my team.

MS. HALLAM: What was that
temperature?
WARDEN HARPER: I don't have that at this time, ma'am.

MS. HALLAM: But yet you can state with confidence that it was a good decision made by your team?

WARDEN HARPER: Absolutely.
MS. HALLAM: And why do you believe that as opposed to the alternative option?

WARDEN HARPER: Because they took temperatures. Officers on the pod and supervisory staff reported to the pod, and they made the determination that the incarcerated individuals did not need to be moved to another pod. They were on the pod.

MS. HALLAM: Okay. I would like to request that you provide us with that documentation of what that temperature was that your team decided was okay for them to be in there for.

Next thing is you said that you provided additional blankets when requested. Was
that one request for blankets to be provided to all the people on all the pods where the heat was out? Was that when the corrections officers on the specific pods requested it? Was that when the incarcerated individual requested them? When requested, what does that mean?

WARDEN HARPER: Supervisory staff at the jail solicit input from inmates on all of our pods, and any inmate on the pods that made a request for an additional blanket, they were given additional blankets. I think it was like three or four pods that was given additional blankets. Chief?

CHIEF DEPUTY WARDEN BEASOM: Yes, sir. We had administrators in the jail on Saturday when we were made aware of this issue, as well as facilities, engineers, personnel to address the HVAC issues. The temperature didn't fall down because there's several air handlers that feed a particular stack, right?

MS. HALLAM: Uh-huh.
CHIEF DEPUTY WARDEN BEASOM: So we had an issue with one. Another air handler was put up to 100 percent capacity, meaning that sufficient airflow was flowing up to these areas.

The temperature dropped, but it never got to an unsafe level, okay? I don't have the exact numbers like the Warden referenced, but it was -it was mid-60s I would guess.

So we took extra blankets to those areas. Anybody that wanted one, we gave it to them.

MS. HALLAM: Okay. Because the statement that was originally put out by the comms account said that everyone was given blankets.

CHIEF DEPUTY WARDEN BEASOM: The complaint originated from Pod 3-Bravo.

MS. HALLAM: Correct.
CHIEF DEPUTY WARDEN BEASOM:
Everybody was given a blanket on there.
MS. HALLAM: Okay. So that pod, everybody got a blanket?

CHIEF DEPUTY WARDEN BEASOM: We sent supervisors to all the other areas in the jail to see if anybody else wanted one. If they did, we gave them a blanket.

MS. HALLAM: What other pods were in the stack where the system failed?

CHIEF DEPUTY WARDEN BEASOM: It
would have been the B-stack.
MS. HALLAM: All the -- so it is all the B's? I didn't want to just assume that.

CHIEF DEPUTY WARDEN BEASOM: Yeah.
MS. HALLAM: It's all the B's?
CHIEF DEPUTY WARDEN BEASOM:
Correct.
MS. HALLAM: So why specifically was $3-B$ the focus?

CHIEF DEPUTY WARDEN BEASOM: That's where the complaint originated from.

MS. HALLAM: Okay.
CHIEF DEPUTY WARDEN BEASOM: We had one complaint coming up that was filed on behalf of 60 other individuals.

MS. HALLAM: Uh-huh.
CHIEF DEPUTY WARDEN BEASOM: Right.
MS. HALLAM: You didn't receive any other complaints from any other pods at that hearing?

CHIEF DEPUTY WARDEN BEASOM: No.
MS. HALLAM: Okay. Thank you very much.

Okay. Next question is about -I'm going to try to like stay organized here, but
the next question is about -- oh, so I know that the use-of-force statistics were being made -were being posted, but I'm wondering instead of just numbers we can get incident report details about use of force.

WARDEN HARPER: Incident report details, so you have to talk to me specifically exactly what you're asking for.

MS. HALLAM: What the force was that was used.

WARDEN HARPER: So you just want to know whether or not a taser was used, et cetera?

MS. HALLAM: I want to know everything that you will give me about it, but more than just the number of incidents.

WARDEN HARPER: Well, I just -give me exactly what you want, and we can try to provide it.

MS. HALLAM: Okay. Can $I$ provide that to you later? I will craft something up, and I'll send it to you.

WARDEN HARPER: Yes, ma'am.
MS. HALLAM: Okay. Yeah, the other
thing is, is it true that you're -- you are required to report use-of-force incident reports


|  |  |
| :---: | :---: |
| 1 | ma'am. |
| 2 | JUDGE HowSIE: Do you have any |
| 3 | other questions? |
| 4 | MS. HALLAM: I just want to know |
| 5 | why I can't get answers. I'm looking for someone |
| 6 | to back me up. |
| 7 | JUDGE HOWSIE: It's not the |
| 8 | appropriate time. Do you have another question? |
| 9 | MS. HALLAM: But why? |
| 10 | JUDGE HOWSIE: Any other questions? |
| 11 | MS. HALLAM: I have lots of |
| 12 | questions, but are they all going to be answered |
| 13 | like this? |
| 14 | JUDGE HOWSIE: Ms. Hallam, ask your |
| 15 | next question. |
| 16 | MS. HALLAM: Okay. So these are |
| 17 | some questions for the Deputy Warden. Okay. |
| 18 | The next is I'm still awaiting |
| 19 | additional information about the most recent jail |
| 20 | death of Anthony Talotta, and I'm wondering if |
| 21 | there is any update to be provided? The last |
| 22 | time we got an update, his death was recent, and |
| 23 | we had not gotten full -- any information about |
| 24 | any of the results, findings of the investigation |
| 25 | into his death, cause of death. |

WARDEN HARPER: I can't talk about that, ma'am.

MS. HALLAM: Ever?
JUDGE HOWSIE: You know he can't. Do you have -- next question.

MS. HALLAM: You told me to not keep asking the same question over and over again, but $I{ }^{\prime} m$ not getting an answer.

JUDGE HOWSIE: Do you have another question?

MS. HALLAM: I do. This is for the Deputy Warden.

Okay. So next, I want to ask specifically about -- you mentioned some classes, programming, stuff along those lines in your presentation. So can you -- do you have a list in front of you of all the classes that are available to incarcerated people?

WARDEN HARPER: I do not.
MS. HALLAM: Do you know the classes that take place in your jail?

WARDEN HARPER: We can get you a listing of the classes, but $I$ don't have that information available at this time.

MS. HALLAM: Man, if I told my boss

I didn't know the programs that we offered in my workplace -- okay.

So when are the classes provided? Are they year-round classes that are provided, or are there certain seasons? Do you do semesters? How do the classes work?

WARDEN HARPER: If you submit me all the questions that you want pertaining to the programs, ma'am, we can answer them at a later time. Right now, I don't have that information at this time.

MS. HALLAM: But you presented on it. My questions are based off of your presentation.

WARDEN HARPER: If you give me questions, Ms. Hallam, we can answer that, and we can provide it to you at the next meeting.

MS. HALLAM: Okay. How about the things that $I$ 'm asking for, you bring those answers to the next meeting, and I'll ask you about them here.

WARDEN HARPER: Um.
MS. HALLAM: Yes.
WARDEN HARPER: Give me a list in e-mail of the questions that you want, and I will
make sure that somebody is here to address all of your issues.

MS. HALLAM: Gotcha. Does the jail -- I've been looking a lot into newspapers that are happening in other detention facilities, like state and federal detention facilities, some county jails, where they actually have newspapers, and it's kind of editorial things that are run by the incarcerated individuals. It kind of doubles as a writing program, and just something for them to, you know -- another extracurricular to take up their time while they're in jail. Is that something the jail has ever had?

WARDEN HARPER: I remember we did have a creative writing program with Chatham that Mr. Pischke was in charge of that we were trying to get back. But I can look into, you know, whether or not, you know, we can get that program back. I know Mr. Pischke was looking at trying to get the creative writing program back. But that's the only thing that $I$ know of thus far pertaining to writing.

MS. HALLAM: Is that something that the jail would potentially look into instituting is a jail-run newspaper for the incarcerated individuals to create content, circulate amongst themselves, kind of a feeling of comradery, and help them with their writing skills at the same time?

WARDEN HARPER: That's something that $I$ can bring to my team and see if it's something that we think that we can do. So I can definitely bring it to the team.

MS. HALLAM: Yeah, please. I would appreciate that.

My next question is about -specifically about bag lunches. So I saw that there is a policy that exists. It's called Policy Number 315, that specifically deals with bag lunches and when those are provided. I was wondering if you could detail that because, like, the -- some of the policy was redacted in what was posted, and I'm just wondering if you could talk about if bag lunches, bologna sandwich brown bags, if that's ever used as a form of punishment instead of giving folks a regular meal tray, or if it's ever used for people in the various mental health tiers?

WARDEN HARPER: First of all, we
don't use any type of food for punishment. And I would have to look at that policy and report back to you at the next meeting about, you know, Policy 315. So that's something I can report back on at the next meeting.

MS. HALLAM: Okay. So you never,
in any instance, trade out as some form of punishment for anything a bag lunch instead of the meal tray?

WARDEN HARPER: As I stated, I will have to look at the policy and $I$ can report back to you at the next meeting.

MS. HALLAM: Okay.
WARDEN HARPER: I don't want to give false information.

MS. HALLAM: Do you also know if folks who are on any of the various mental health tiers and the mental health pods are being given different food, not in trays or bag lunches, different than the other pods?

WARDEN HARPER: I have to report back on that also.

MS. HALLAM: Okay. I think that's all $I$ have for now for him.

MR. O'CONNOR: I just had a heat question. So when it was reported, what was the actual issue? Was it the HVAC?

MS. HALLAM: It flooded. The water came down. Sorry.

MR. O'CONNOR: For the heat?

CHIEF DEPUTY WARDEN BEASOM: I got the follow-up with Facilities, Mr. O'Connor. I don't know the --

MR. O'CONNOR: Okay. That's okay. CHIEF DEPUTY WARDEN BEASOM:

Technically --

CONTROLLER O'CONNOR: Because I know you guys gave us, $I$ think you said it, today was the capital budget request and that link, which is helpful from our side. But how often is it inspected? I mean, do we do this -- it's more a county-wide question $I$ would guess. How often do we do our inspections on facilities, heating, and all that stuff?

## CHIEF DEPUTY WARDEN BEASOM:

There's preventative maintenance completed on the HVAC, plumbing, electrical, those things, but $I$ don't have the schedule in front of me.

MR. O'CONNOR: Okay. All right. I just didn't -- $I$ didn't know if we knew that
offhand, okay.
JUDGE HOWSIE: Any else, Warden?
WARDEN HARPER: No, Your Honor.
JUDGE HOWSIE: Thank you.
Chief Deputy Warden.
CHIEF DEPUTY WARDEN BEASOM: Thank you, Your Honor. Good evening again, Board. I'll start with staffing. Since the last Oversight Board meeting, we have not had any promotions in the jail operations side of things.

We graduated six cadets on Friday, November lith. Our next cadet class begins this coming Monday, December 5th, consisting of four cadets.

We have upcoming physical agility tests scheduled for January 10th, 12th, 14th, 17th, and 19th. And the application process continues to be currently opened and perpetually opened. And I'll continue Reverend Howe's shameless plugs, that anyone interested to apply can go to joinACJ.com.

The suicide-resistant cells, the installation and finalization of this project resumed this morning and is expected to be complete by early next week. We're hopeful

Monday or Tuesday the last three cells will be completed.

State transfers. We currently have 19 males, zero females with 300 B 's in the facility. We have four males with 300 B 's that have detainers and three males with open cases and also $300 \mathrm{~B}^{\prime} \mathrm{s}$. The longest wait time on the 300B right now was received on November 1st, and the shortest wait was received on 11/23. And we have three scheduled transport dates coming up this month of December.

The use-of-force numbers for
November were 22.
That's all $I$ have. Is there any questions before $I$ pass it to Dr. Brinkman?

JUDGE HOWSIE: Ms. Hallam?
MS. HALLAM: I actually don't have any questions for that, but one of the things $I$ would ask is just so that $I$ don't do what $I$ seem to do every meeting now that we have like multiple other people presenting. Can we break it up on the agenda? You know, like can yinz submit what you're going to -- so that I don't ask a question that you're going to answer because $I$ thought you didn't address it because I
don't know which Chief Deputy Warden is reporting on it?

CHIEF DEPUTY WARDEN BEASOM: What's your question pertaining to?

MS. HALLAM: Well, I mean, I have a whole bunch, but are you talking about anything else on this list?

CHIEF DEPUTY WARDEN BEASOM: No.
MS. HALLAM: Okay. Cool.
CHIEF DEPUTY WARDEN BEASOM: Okay.
JUDGE HOWSIE: Any additional
questions?
(No response.)
JUDGE HOWSIE: All right.
Dr. Brinkman.
DR. BRINKMAN: All right. Good evening. For Old Business related to COVID-19 updates, incarcerated individual infection rates and testing, there are currently three incarcerated individuals presently positive in the facility with zero hospitalized from COVID-19. The total amount of incarcerated individuals tested during November was 1,814. Of those 32 , or 1.76 percent, were positive.

Of employees, throughout the pandemic, we've had 337 staff report positive results, presently awaiting one to return to work from their recovery process.

Vaccination clinics have continued with our incarcerated individuals, and currently, 617 or 44 percent of the population have received the full series.

The Warden had referenced that there are new CDC guidelines related to correctional facilities, and it was just released yesterday, so $I$ have not consumed every bit of it yet. But we are scheduled to meet with the Allegheny County Health Department and the Allegheny Health Network to decide what kind of changes we might be able to make based on those guidelines, hopefully in the next week or so.

For medications for opioid use disorder and the expansion of efforts, our continuation of medication-assisted treatment includes the following during the month of November: 16 individuals prescribed oral Naltrexone, with one receiving the Vivitrol injection prior to community release; 101 individuals treated for -- with Suboxone and seven of those treated with Sublocade. Of these,
two patients transitioned from Suboxone to Sublocade to support their recovery; methadone continuation services have treated 16 individuals with 12 current patients.

Of our Torrance commitments and admissions during November, five were admitted and transferred to Torrance State Hospital. Six patients were committed to Torrance State Hospital. Two had their commitment to Torrance for competency restoration rescinded due to clinical stabilization. Currently 22 are awaiting admission to Torrance State Hospital, with the longest waiting since August 12 th.

For Tiers IV and V mental health data, as a reminder, Tier $V$ includes any patient actively suicidal or self-harming, while Tier IV includes any patient who is at imminent risk of self-harm, suicidal or homicidal ideation as a result of their mental illness. In November, one individual was identified as a Tier $V$ in the mental health tier system, and 15 unique individuals identified as Tier IV.

For our reporting of appointment
queues to review our current wait times, this was as of this morning or early afternoon. Our
medical sick call requests had 24 waiting, with the longest waiting four days. Our mental health sick call requests had four, with the longest waiting two days. Our psychiatrist's appointments have 236, with the longest waiting 40 days. And our mental health specialists, which is a follow-up service beyond their initial request, has six, with the longest waiting two days.

And the final portion that $I$ kindly ask for you to allow me to add were healthcare successes last month. So in one of our department meetings a discussion came up of what makes our team proud to serve our patients. We acknowledge that individual patient successes may look different in our facility than others, you might imagine because our patients have an enormous range of needs and functioning. This range includes severe medical cases all the way through anxiety from being incarcerated. One patient with a terminal illness with less than six months to live had exceeded all expectations through our care, where he has now experienced an improved quality of life a year beyond his original six months prognosis.

Another individual struggled with her activities of daily living, specifically attending to her self-care. Through our staff's empowerment, she has developed a greater sense of self-respect, even pride, and now consistently showering and independently supporting her own needs.

Our staff recognizes the disruption of incarceration posing on an individual's life, and one staff member quickly found how the anxiety of incarceration was impacting someone's well-being due to concern for their pet and who would be caring for their pet while they were incarcerated. A staff member quickly coordinated to ensure that the pet was safe and cared for.

While these examples may seem less important to some, these are the patients that our staff care for every day, a wider range of anything, like $I$ mentioned from just the adjustment of having this disruption, all the way through severe medical issues.
And early findings of our
interdisciplinary team clinic expansion that $I$ talked about the last month or so, what $I$ found incredibly important as an outcome that the
expansion has directly impacted staff retention, some staff feedback that was very welcomed. What

I heard was that they -- the program itself has allowed for them to spend more time with their patients, which supports their own personal missions to serve, see patient improvement, and finding meaning in their work. And we believe that a fulfilled team member is going to be a better care member and care provider, which was made clear when we found that appointments managing our patients' chronic illnesses showed an increase of completion of approximately 29 percent since the pilot was expanded from August through the past month.

That's all that $I$ have.
JUDGE HOWSIE: Any questions?
MR. O'CONNOR: Just two quick ones.
The wait time, has it gone down more with the pilot program.

DR. BRINKMAN: Yes.
MR. O'CONNOR: I don't know if you said -- what is it now?

MS. HALLAM: Yes.
MR. O'CONNOR: I know --
DR. BRINKMAN: So the wait times
that $I$ brought with me, the longest initial request was waiting for four days.

MR. O'CONNOR: Four days. That's it? On when -- but it's not on every floor? It's just the floor that it's roving to?

DR. BRINKMAN: No, the clinic is in operation throughout the building.

MR. O'CONNOR: It is? Sorry. So what $I$ meant is it's four per floor was the longest you heard?

DR. BRINKMAN: No, no. So the very
initial request of somebody never talked to us, but they have a new issue.

MR. O'CONNOR: So that was four days? So on --

DR. BRINKMAN: Four days.
MR. O'CONNOR: So on the third floor, four days?

DR. BRINKMAN: No, out of the whole building.

MR. O'CONNOR: Oh.
DR. BRINKMAN: The longest waiting was four days.

MR. O'CONNOR: Was four days, okay.
DR. BRINKMAN: As of today.

DR. BRINKMAN: Wait of what kind of service?

MR. O'CONNOR: I mean, a lot of it was mental health, and we'll have that conversation later, but just -- it seems like a lot of people are getting serviced quicker.

DR. BRINKMAN: Uh-huh.

MR. O'CONNOR: So can that be used at intake as well just for basic needs to speed some of those waits up?

DR. BRINKMAN: I'm not sure I --

MR. O'CONNOR: I know it was
basic --

DR. BRINKMAN: The information that
you have doesn't seem to match what $I$ see happening in the building, so I'm not sure what exactly you're asking about. I'm sorry.

MR. O'CONNOR: So, I mean, when I was in intake, it seemed like it took a while for somebody to get seen because of understaffing.

DR. BRINKMAN: Okay.
MR. O'CONNOR: So now that this program is being successful -- and I'm not asking that you do it tomorrow --

DR. BRINKMAN: Sure.
MR. O'CONNOR: -- but if it's being successful on all these other floors, and it's a four-day wait, which you know, hopefully, somebody is not down in intake for that long, but --

DR. BRINKMAN: No.
MR. O'CONNOR: But it seems like a lot of people are having issues just getting seen down there because the staff was so short.

DR. BRINKMAN: Sure.
MR. O'CONNOR: Is there a
possibility of doing something like this down there as well? I understand you're understaffed, but can that float around a little bit more to
speed some of that process up?
DR. BRINKMAN: We're working on some other plans with the --

MR. O'CONNOR: Okay --
DR. BRINKMAN: -- with the team to be able to address how we handle things at intake.

MR. O'CONNOR: Okay.
DR. BRINKMAN: That's something that's going to take its own workflow.

MR. O'CONNOR: Its own course, but you're working on something regarding that?

DR. BRINKMAN: Yes, yes.
MR. O'CONNOR: Okay.
JUDGE HOWSIE: Ms. Hallam?
MS. HALLAM: Thank you. I do have some questions because -- first of all, when you say like the longest wait was four days, like, as of today, $I$ have seen documentation that shows people waiting for sick calls much -- many more days than the number that you're reporting to us here. So I'm wondering why on paper is it looking like people are waiting longer to see medical or mental health than it actually gets reported to us here?

DR. BRINKMAN: I'm not sure what you're talking about. What kind of documentation you're talking about.

MS. HALLAM: Documentation from the jail, the list of people, and what day they've been waiting to see medical since.

DR. BRINKMAN: So we have multiple types of appointments that somebody might be waiting. So the four-day wait that $I$ was talking about is this is the first that you've communicated to us that there's something you want to talk to us about. So that's the four-day wait. And then when we come to see you and find out what's going on, you might be waiting to talk with a provider after that. So it's kind of like you walk into your PCP's office. The very first person you see is that medical assistant that is kind of triaging what's going on, and then they're making some medical decision-making in the background of what kind of service we need to do to help support that.

So there are different types of appointments that you could be waiting for.

MS. HALLAM: So it's basically like if we're equating it to like someone on the
street going to the doctor -- I was under the impression when you were giving us wait times that was how long people waited for medical treatment, not just for someone to acknowledge their request for medical treatment. I don't know if I'm the only one.

MS. KLEIN: I thought that.
MS. HALLAM: You also thought that?
Yeah, I feel very misled because I thought that the numbers that were you telling us were they requested medical treatment, and then they're waiting four days to get it.

What you're saying is they wait four days for their doctor's office to pick up the phone.

DR. BRINKMAN: No -- what I -- so what I'm trying to explain though is we're trying to make sure there's a face-to-face to do a triage of what exactly is going on. We want to make sure that there's not an incredibly terrible thing going on with you. Even if -- so we don't always see what the initial request was for, like, what was the initial concern that you had. So we're coming to find out and triage what the medical decision-making is going to be from there.

MS. HALLAM: Okay. So how long are folks waiting for medical treatment, not for triage, for treatment of.

DR. BRINKMAN: That's going to depend on what the issue is. So if somebody is saying $I$ broke my glasses, $I$ didn't get my glasses, or I didn't have them when $I$ was arrested, the wait for them to see the optometrist is going to be very different from the wait for them to see one of our primary care providers. Those are all -- it's very dependent on what the actual issue is.

MS. HALLAM: So do you track those issues? Do you track this person needed to see a cardiologist, and they didn't get to see one for six months? Do you track this person has been having issues with their insulin, and they need to see whatever kind of doctor does diabetes? I don't even know what kind of doctor does that.

JUDGE LAZZARA: An endocrinologist.
MS. HALLAM: An endocrinologist.

Thank you, Judge. Why do you roll your eyes? I didn't know that. I'm sorry.

Okay. But yeah, do you track that at all from request to treatment, or do you only track from request to triage?

DR. BRINKMAN: We have -- not in the very specificity that you just described, no. But $I$ have in terms of like levels of care, so how long they're waiting to see the provider versus how long they're waiting to see the optometrist. Yes, I do have, because the optometrist is a specific on-site service that we have.

The cardiologist, very different because there's an awful lot of assessment that has to go on before they even get to the point of making a referral to a specialist. So when you go to see your primary care provider, you're not immediately going to the cardiologist. You're going through whatever that primary care physician wants to screen and test for prior to making that referral.

MS. HALLAM: Right, but I'm also getting treatment on the spot.

DR. BRINKMAN: You're getting
treatment to the generalized information. You might not have the diagnosis identified at first.

MS. HALLAM: Right. I feel like
you're just like playing semantics here, and I
just want to know how long people are waiting for
medical treatment.

DR. BRINKMAN: I'm not trying to play semantics. I'm really not.

MS. HALLAM: Okay. So what I'm saying is, is medical treatment being provided in four days from request?

DR. BRINKMAN: Not across the board, no.

MS. HALLAM: Okay. So can --
JUDGE LAZZARA: But if somebody is -- somebody within four days, right?

DR. BRINKMAN: Yeah.
JUDGE LAZZARA: So the request to the jail would be like making the phone call to your PCP.

DR. BRINKMAN: Yes.
JUDGE LAZZARA: And the four days would be the initial assessment at the PCP.

DR. BRINKMAN: Right. So, it's a nurse, or it's a provider. It's somebody coming to say what's going on when you answer it.

MS. HALLAM: I understand.
DR. BRINKMAN: Right.

MS. HALLAM: I very much
understand. I used that same phone call analogy. I understand. I'm just saying, so people aren't being addressed at all for four days. And then after, they receive treatment at an undetermined period of time. That's what's being said unless I -- correct me if $I^{\prime} m$ wrong, but that's what's being said here.

JUDGE LAZZARA: But if you call your PCP today, Bethany, you're not going to get an appointment right this minute.

MS. HALLAM: I can walk into an urgent care right this second and no one in jail can. So yes, $I$ could get treatment right this second. If that's what we're going to compare it to, right -- this whole time that we've been talking about wait times, I truly thought that we meant treatment, and I'm not the only one. It's a big difference.

MS. KLEIN: I think to clarify this at least for me, could you maybe tell me who that first touch is, what level of provider?

DR. BRINKMAN: Most often, it's a nurse.

MS. KLEIN: Okay. Could it be an

MA? Could it be --
DR. BRINKMAN: It could. And the MA would make the decision make -- we train our staff as qualified healthcare professionals to be able to make the immediate referral. So it could be somebody -- and I think I referenced this in the last meeting, that at the -- their face-to-face interactions -- encounter that they had, the provider got engaged immediately, and it ended up becoming a send-out off-site. So it doesn't mean that treatment is concluded on that time because you might have a complicated issue that you're not going to be able to resolve everything in that moment, but you're connected to healthcare to get access to what needs done as quickly as the medical need deems necessary.

MS. HALLAM: Okay. I'll continue on with my question because my next thing aligns with this. So the thing $I$ was going to ask is you read off a lot of numbers when you come here, and $I$ do think they're very helpful numbers, but it's not even that you're reading too fast. It's just a lot of numbers and a lot of stuff to write down. We already get this, like, packet that has lots of other information. Is there any reason
that the numbers you're reading to us -- I can't even remember what they all were, like COVID, vaccines, positive COVID cases, people on MOUD, because I see that there's a line in here about substance use services. But it doesn't seem that those numbers align with people who are receiving MOUD. So basically all the numbers, the report that you come here and give us, is -- can you put it in this packet, like, for the meetings every month?

And then with that, you could maybe actually put the wait times that people are waiting for treatment.

DR. BRINKMAN: So the packet there is something that's compiled pretty large-scale, so I don't get to make that decision. We can look at it as a team.

MS. HALLAM: You don't get to make that decision, if your information is allowed to be printed as opposed to just told to us at a meeting?

WARDEN HARPER: So you're asking that the report that Dr. Brinkman gave the Board today to actually be in the packet that you just showed?

MS. HALLAM: Correct. Truly any numbers. You guys got numbers about something, you got data, statistics that you're going to come here and report to us. Can we see it ahead of time so that we can review it? I mean, I know you had it probably when you made this.

WARDEN HARPER: We can definitely look into it.

JUDGE HOWSIE: Any additional
questions?

JUDGE LAZZARA: Hey, Ms. Hallam, can $I$ just interrupt because $I$ have a family obligation that $I$ have to leave in the next few minutes, and I'd like to ask something and report on some things that $I$ was doing.

MS. HALLAM: Yeah, we can like go to that and then resume this.

JUDGE LAZZARA: And then you can resume this?

MS. HALLAM: I just have more questions.

JUDGE LAZZARA: I'm not saying you shouldn't ask your questions.

MS. HALLAM: Yeah, I get it.
JUDGE LAZZARA: I'm just saying
that I need to -- I need to leave, and so I would like to be able to address a couple of things that are on my plate, so...

So the first thing is I always like to provide the numbers about the jail population. Ms. Hallam was hopeful that at some point we could get below 1,400, and I can tell you that the status of the jail population as of 4:30 p.m. on November 29, 2022, was 1,373 people in the Allegheny County Jail, and 129 in alternative housing. That does not include anybody with federal holds.

MS. HALLAM: Oh, okay.
JUDGE LAZZARA: Well, that's --
MS. HALLAM: I count that.
JUDGE LAZZARA: These are the county's number, so that's -- 7 percent of the people in the jail are serving a county sentence as a result of a new conviction; 29 percent of those people are in alternative -- 29 percent of the people in alternative housing are serving a county sentence. So a lot of those people serving county sentences are being moved to alternative housing.

20 percent of people in the jail are on an external hold from either other counties or other jurisdictions. 42 percent of the people in the jail itself were detained by Allegheny County Adult Probation. These people were detained for violating probation on a crime for which they had previously been convicted. 88 percent of those were of moderate or high risk to re-offend based on Probation Proxy scores. 24 percent of the people in the jail were held pretrial only, meaning that there were no external holds or detainers keeping them in jail. Of those people, just over 1 percent screened as low risk for re-offense. 20 percent of the people in alternative housing were held pretrial only.

66 individuals, that's about 5 percent of the population, are currently being held on monetary bonds. Of these, only six screened as low risk, and only two of the people in alternative housing are held pretrial on monetary bonds. And all pretrial monetary bonds are reviewed for possible bail modification, every single one of them.

In terms of declines over the course of the time, from March 16 th, there were

2,075 folks in jail, 1,859 in the jail itself, and 216 in alternative housing. That is a 20 percent decrease in the population of the jail, and a 40 percent decrease in the housing population, the alternative housing population, as of the end of November.

The detainer population has also had a 34 percent decrease since March 16th of 2020, so that's being worked on. It's a process all the time, and we are working on that. So those are those numbers.

MS. HALLAM: Can we get that -- I know you said last meeting you were going to start sending it to us.

JUDGE LAZZARA: I know. The problem is, $I$ didn't get it until right before I walked in today.

MS. HALLAM: Even if you send it after the meeting, just so that $I$ can have it.

JUDGE LAZZARA: Okay. Okay. I just --

MS. HALLAM: Yes. Yeah, that would be good.

JUDGE LAZZARA: I just -- I just -some days they give it to me early, and some days I get it right when I'm walking out. So I got it right before I walked out.

MS. HALLAM: I think that's
different than the information that we're requesting from them. I don't think I need that ahead of the meeting. It's nice to get the report here, but yeah, the PDF would just be helpful to see it.

JUDGE LAZZARA: Okay. Okay.
MS. HALLAM: Thank you.

JUDGE LAZZARA: There were -- there were some things that were on for Old Business, so that was the update on the statistics.

The liaison position, we have -it's been amazing. We've gotten what, like 55 -I think approximately 55 applications for the liaison position, and that's one of the reasons why it has not happened in response to the young lady in the back, because we have gotten 55 resumes from folks and applications from folks who were interested in those positions.

I know I spent several nights going through the original grunch of 43 of them, and then we got another 13 of them that we were just provided with the information for today. take a look at those last 13, then we've already started talking about when we can have a meeting to sit down and talk about who out of that group we would like to do the initial interviews with. We will not be interviewing all 55 or 56 of them. That's too many, so it will be the people that we all can sort of agree on giving the interviews to. So it's really been a tremendous response. And $I$ know for me looking at it, $I$ know that I've seen some people that $I$ think are the right people for this job, and so I'm very excited about what's in there. So we will be hopefully before the next meeting, although with December, I don't know. Hopefully, having that conversation and being able to at least schedule the interviews, which would be awesome. So I wanted to update everybody on that.

The other thing that $I$ wanted to bring up before I left was a matter that was brought to everybody's attention by Mr. K, and Mr. Korinski, who could also be a Mr. K. In terms of the exit interviews, because $I$ know that Judge Clark was really the person who was sort of spearheading the exit interviews, and I know

Bethany was on -- you guys sort of had a little committee that was doing the exit interviews. And then $I$ know that we were waiting for a form to be drafted for the exit interviews that Judge Clark was talking about at some of the meetings. Do you remember that? She was talking about a form for the questions and sort of trying to institutionalize it, and then she left the Board. And I think that what happened is she was the head of that committee, and $I$ think it sort of got lost. So $I$ would sort of be making a motion to reinstitute --

MS. HALLAM: Second. JUDGE LAZZARA: -- a committee for those exit interviews so that we can start doing that on a more consistent basis and learn why people are leaving the jail.

MS. HALLAM: I'll second that
motion, and also $I$ would like to be on that committee very much so. Because what $I$ will say is $I$ know -- and this is kind of also in response to Public Comment, although I know I'm not allowed to do that, but I -- I do exit interviews with some people. Again, $I$ cannot get to every single person that reaches out to me, but $I$ get
reached out to by a lot of people -- also people currently working in the jail, but specifically for exit interviews, people who leave the jail and want to tell me about it. Their problem is they're very worried about their anonymity, and they hear from someone that they can talk to me, and I talk to them. They do not want to talk to the full Board. So maybe if when we start this committee, we can figure out a solution to that as well. They are very worried about
retaliation. They are very concerned about that, and $I$ think that's a fair thing for them to be worried about.

So I do have conversations with people, but again, $I$ don't write up a written report. I don't have a form that $I$ could fill out. If $I$ had that, even the ones that $I$ do by myself, I could fill it out and provide that information maybe with a redacted last name or something to the Board. But I -- I do not find myself qualified to create that form.

JUDGE LAZZARA: Yeah, and that's -that's I think -- Judge Clark was working on that form if you guys don't recall.

MS. HALLAM: I don't remember that.

JUDGE LAZZARA: I don't think I'm crazy about that, but $I$ think she was working on that, and then she left the Board, and so she turned it over to Judge Howsie. And I think that that project may have gotten lost in the shuffle. So I appreciate the fact that Mr. K and Brad Korinski have brought that up again.

MS. HALLAM: Awesome.

JUDGE LAZZARA: And I would make that motion that perhaps we reinstitute the subcommittee that was going to look at exit interviews and what we should ask people and how we should go about doing that.

MS. HALLAM: And I seconded that. JUDGE HOWSIE: Any other discussion?

Is that something that we want to waive until we have an Executive Session about?

MS. HALLAM: No. We have a motion and a second. We need to vote.

JUDGE HOWSIE: Thank you,
Ms. Hallam.

MS. HALLAM: You're welcome.
JUDGE HOWSIE: Is that something we should talk about in Executive Session? I've
never heard of any discussion.
MR. PILARSKI: Saying that you are not going to talk to the entire Board is a problem. I mean, you're painting a --

JUDGE LAZZARA: Well, no, it's not -- I don't think it's going -- it's a subcommittee that would be deciding how to go about those exit committees and everything. So I'm not saying --

MR. PILARSKI: You're saying that the --

JUDGE LAZZARA: I'm not saying that the entire Board should sit there and talk to them, but I think the Board should know why people are leaving.

MR. PILARSKI: Hiring and firing goes under the Executive Branch. I don't know what you're going to do with the information.

MS. HALLAM: Remind him -- you're not speaking into your microphone, first of all. And also the Executive -- we're not talking -you said hiring and firing goes under the executive is what he said off mic, but leaving, quitting your job is not.

JUDGE LAZZARA: Well, because we
want to --

MS. HALLAM: People voluntarily
leaving.

JUDGE LAZZARA: -- see why -- we're
not -- we're not -- we're not doing hiring and firing. We just want to see why they're leaving and is it something that we can remedy? Is it something that we can suggest to the administration about how to do something differently? Are they leaving because of how things are occurring in there? Are they leaving because -- you know, why are they leaving? We have no idea. So it would be nice to know because $I$ think staff retention, especially in this day and age, is a huge issue. And if we can do something to retain staff, that would be an awesome thing. So it's just a matter of let's figure out where we can go with it. I know we were working on it before and it sort of fell off the radar.

JUDGE HOWSIE: Any votes in favor? (Chorus of ayes.) CONTROLLER O'CONNOR: Is it a confidential form?

JUDGE LAZZARA: We're not even
talking about the form. We're just talking about how to do it.

MS. KLEIN: Forming a subcommittee.

MS. HALLAM: Looks like four yeses.

JUDGE HOWSIE: Mr. O'Connor, is
that a yes?
CONTROLLER O'CONNOR: Yeah, yeah.
JUDGE HOWSIE: Okay. Motion carries.

Anything else, Judge Lazzara?
JUDGE LAZZARA: No. That's it.

Sorry. And I apologize $I$ have to leave, but $I$ have -- I have pickup duties and there's nobody else to do it, so it's me. We all have lives out of this too. So sorry about that.

JUDGE HOWSIE: Do you have any additional --

MS. HALLAM: I have a lot more.

Yeah.

Okay. Where did she go? Did she leave on purpose?

JUDGE HOWSIE: Why don't we go on. I'm sure she'll be back.

JUDGE LAZZARA: Yeah, she just -she went to the bathroom. that --

MS. HALLAM: Okay. Do you think

JUDGE HOWSIE: Why don't we go to Deputy Toma?

MS. HALLAM: Okay. Okay. Cool. All right. So -- oh, you're going to go and then I'm going to ask you questions, or do you want to try to answer some of the questions that $I$ have.

DEPUTY WARDEN TOMA: Why don't I go first, and then maybe I'll be answering some of yours.

MS. HALLAM: Sure. I hope so.
DEPUTY WARDEN TOMA: So in regards to the inmate mail policy, it actually has become very robust in nature, considering that we've addressed a lot of the comments from the Board as well as outside and other stakeholders. So we're looking to actually separate both the inmate mail portion of the policy and the book review portion of it to be two separate policies. So that policy is still currently under review.

But some of the procedures or changes that we have put into place that we are currently monitoring and measuring and gathering feedback, as I mentioned before, we added the
book orders appeals process to the tablet, so that is active. And we've also implemented the book requests, which is also active. To date, we've received over about 175 requests regarding books. This is both to be added to the E-library as well as physical books. Those are from 109 individual users.

Facility messaging is still being used to communicate any books that are returned to sender for administrative reasons. You guys were provided that document. I would like to make a note that we had some issues with the export from the program, so some of the languaging -- yeah, so some of it is missing some literal letters due to how the document was exported. So we are working to get that problem resolved, but we wanted to get you something because that was requested to the Board, and we'll -- like I said, we're going to work on the export, so you have something that is complete.

The book review committee has been established. Representation from both Chaplaincy as well as Adult and Juvenile Education sits on that review committee. They did meet and reviewed all the books that were previously
rejected from the facility that were disseminated as well to the Board. All those books, rejections, were overturned. We are working to have that information posted on the website.

Additionally, we went ahead and purchased physical copies of all those books, and they will be added to the library, the physical library and disseminated through the facility. They've been also disseminated to the committee to review to put onto the E-tablets.

One of the things that the committee has identified is that the E-library is also available to the juvenile population, so the Intermediate Unit is reviewing all books for appropriate content for accessibility to that population as well. We have expanded our E-library based on the requests of the books, and we continue to do that.

The physical library is in the process of being moved -- to -- we identified the previous location and size was not conducive to the expansion of the new procedures. So we actually built a completely new space for the library, and we are in the process of finishing that up. So the current requests we have been
receiving for physical books have been delayed as we move that -- move the physical library and re-inventory those books and organize them.

Next steps that we are working on as it applies to the BIP policies, things that we're implementing that are reflected in the revision are working with our community providers and other programs within the facility to better utilize our library as well as the E-book system to expand upon the existing programs.

So with the Narcotics Anonymous,
Alcohol Anonymous, we actually had a meeting today with them, looking to see what books they recommend so that they can be continuations of those services, as well as we're working with AIU, the juvenile and adult education where they're able to use our book libraries and systems to expand upon their programs that they are running, to include -- AIU would like us to use that for extra credit projects for the juvenile population. So we're also looking to expand those resources to support those programs. JUDGE HOWSIE: Do you mind speaking to the -- would you like to comment on the commissary and food service vendors?

DEPUTY WARDEN TOMA: Yeah.
Commissary was awarded. That contract is still -- it was awarded. Oasis was the company that was awarded. I did not provide a final execution of the contract for that. It was as of yesterday. It was not issued a contract number, so I did not have a final version to disseminate to you. But they were the awarded vendor. They started today.

MS. KLEIN: Can you spell that?
DEPUTY WARDEN TOMA: Oh, O-A-S-I-S, Oasis.

MS. KLEIN: Oh, Oasis. And that's just the commissary?

DEPUTY WARDEN TOMA: Yeah, it's just commissary. The food RFP is still out pending. I have no further comment on that item. JUDGE HOWSIE: Any questions?

MR. O'CONNOR: Yeah. So the books that you were sending us back, is that the reason why they were banned? Is that the document that didn't go through properly?

DEPUTY WARDEN TOMA: No. That --
that document that was the issue was the communication to the individual that was the
recipient of the books notifying them these books were returned to sender and the reason that they returned to sender.

CONTROLLER O'CONNOR: Okay. But
the reason for other banned books we asked for.
DEPUTY WARDEN TOMA: That was given another document that was previously disseminated?

MR. O'CONNOR: Oh, we have that. I'm sorry. I didn't --

DEPUTY WARDEN TOMA: That was given and --

MS. HALLAM: It was like today was the e-mail.

MR. O'CONNOR: Sorry. That's fine. I didn't see anything today.

DEPUTY WARDEN TOMA: Okay. And all of the books that are on there, like I mentioned, went to committee, and those were overturned. So again, we have purchased all those books and have added them to our physical library.

MR. O'CONNOR: Okay. And then just on the commissary. I'm sure others are going to ask about this, but -- and $I$ know somebody new has that. I just hope for the wellness of
everyone in there and, you know, the kitchen, I know, is going to be out there as well. I hope that it is a different vendor. I know I can't --

DEPUTY WARDEN TOMA: So I can speak
to that real quick just to --
MR. O'CONNOR: Okay, yeah.
DEPUTY WARDEN TOMA: Oasis is only
a commissary vendor. So your concerns are alleviated because they don't even have a -MR. O'CONNOR: Okay. That's very good news, because we had a -- as you know from our office, I mean, we -- it's good that you're doing that separate because, you know, there was no incentive for the last person to do anything good in either one because that was the only option. Now at least if it's separate, there will be more transparency, hopefully more nutrition, and then $I$ still have requests for nutrition at a federal level, but that's a different conversation. But I'm glad that it's going to be separate and it's going to be two different people because that way we can hopefully ensure that this is changing.

Do we know when the kitchen
contract is going to be done? Is that in January?

DEPUTY WARDEN TOMA: I wish I had an answer for you.

MR. O'CONNOR: Okay. That's fine. I mean, I'm just glad that it's two different. I think that is -- it's a step in the right direction from where we were before. So good to hear that. So that was my question.

JUDGE HOWSIE: Do you have any questions, Ms. Hallam?

MS. HALLAM: I do have some. Thank you, Judge Howsie.

So my first question -- sorry, I
actually have a whole bunch. But my first question was -- and actually going off of Controller O'Connor, if you remember, I was reviewing the meeting minutes earlier to make sure $I$ wasn't imagining this, but this -- you had asked for this. This was this -- show us the notification because the policy had been effective for two years, and we had -- no one had received this, so you specifically asked for this as proof that this has been happening. The dates on this are from November 2nd forward after that already happened. I want to see that you were
doing this since this policy was implemented.
DEPUTY WARDEN TOMA: And $I$ can speak to that. We did a process assessment. We went through the entire process with those individuals that handled that. We identified through that process that it was documented and communicated to the pod officers through the system and only upon request by the incarcerated individual when they asked about their books, then it was communicated to them.

So, no, I recognize that we were not following the policy, but since we have identified that, and actually prior to identifying that, this was implemented, and we have since closed that loop.

MS. HALLAM: Great.
DEPUTY WARDEN TOMA: So we completely acknowledged that that was not being done, and it was only done as a verbal communication when that individual asked.

MS. HALLAM: Great. Thank you very, very much. I appreciate that.

So then my next question is, I just want to understand this list of the books since they started tracking returned July 2022 . When
you were explaining was $I$ understanding that the ones that don't say no receipt, are those -- like that say like violent imagery content -- I think that's what they all say, violent imagery content -- yeah, are these the ones that you're saying that you took with the review committee and you overturned it?

DEPUTY WARDEN TOMA: Yes. That review committee reviewed the books, and they determined that they did not violate any of the policy requirements and would be appealed. So we initiated our own appeal process as opposed to those individuals having to do the appeal, and you know, it was overruled, and the books are -no longer would be...

MS. HALLAM: So did you give, for example, I'm trying to like find a book in here, Animal 1, 2, 3. Did you -- when you overturned it, did you give that book to the person that it was originally sent to?

DEPUTY WARDEN TOMA: No. We added it to the library since it is now permissible. So it's in the physical library.

MS. HALLAM: But why didn't -- why didn't -- why didn't you give the person their
book? Like, what are you going to do going forward with your process? I'm assuming that some of these were older ones?

DEPUTY WARDEN TOMA: Oh, yes.
These were older. The books -- so the books will be held now while it went through the review process. So those books were already returned, so we did not have the books that were sent to them to give to them. So --

MS. HALLAM: Go ahead.
DEPUTY WARDEN TOMA: So in the
future, the procedure requires us to hold that book if it's under question, to go to the review committee. If it's -- you know -- if it's determined that the book is permissible, then it would be given to them. If it was not, it would be returned because the -- and they will -- they would have the opportunity to appeal, and it would go through it again.

MS. HALLAM: How long is that process?

DEPUTY WARDEN TOMA: We're still -that's part of why the document is in draft, so we're still working out those details.

MS. HALLAM: So if -- so I was
under the impression that this was in place already?

DEPUTY WARDEN TOMA: These are things that we have established, but the policy has not been finalized. That's why we're working through the procedures to determine what is reasonable and what can be accommodated within that group, and then for us to monitor that procedure, and then make sure that we can implement it appropriately and hold it.

MS. HALLAM: Okay. So I'm confused
because $I$ thought the chaplain said earlier that this review process -- review committee has been happening?

DEPUTY WARDEN TOMA: Yep. They reviewed -- they reviewed those books like I stated.

MS. HALLAM: Right.
DEPUTY WARDEN TOMA: There's also instances where we get book requests to add new books.

MS. HALLAM: Did you not get any new books that you had to use the review committee for since that committee has been in place?

DEPUTY WARDEN TOMA: Correct.

MS. HALLAM: They have only reviewed old books?

DEPUTY WARDEN TOMA: There's nothing else that's come up that has been needed to go to the committee.

MS. HALLAM: Okay. So when -- is this policy written down somewhere what you're doing already? I understand that you say it's not finalized, but you know?

DEPUTY WARDEN TOMA: Yeah, it's in draft, and we're actually working with everybody, all the departments that sit on the review committee to work through the draft policy and finalize it.

MS. HALLAM: Okay. Did you let the people know whose books were -- the senders or the incarcerated individuals of the books that you appealed and overturned? Did you let them know that their loved one can now send them that book?

DEPUTY WARDEN TOMA: So at the time of that process, that was not maintained in that list as to the individuals, so...

MS. HALLAM: So you have no idea
who these books were supposed to go to?
DEPUTY WARDEN TOMA: So we are actually working to determine if we can pull that out of the system. So it's another thing that we're working on.

MS. HALLAM: Okay. And these books are where? The books are now physically on the pods?

DEPUTY WARDEN TOMA: No. We have them physically in the facility, and like I stated, we are moved to the physical library. So we're waiting to fulfill requests to the pods for any books that are physical in nature.

MS. HALLAM: So I know that was a public comment. The request earlier was for a physical library that people can check books out. Is that what you're doing?

DEPUTY WARDEN TOMA: We have a
physical library where we store the books. The books are then put on the carts, as you have seen, and we fill those carts with the requests. So on the pods they have the ability to check out books from the carts, and through the tablet, they're able to request specific genres of books to be added to their pod carts.

MS. HALLAM: How can they go browse to see what their options are?

DEPUTY WARDEN TOMA: Currently, there is not that option.

MS. HALLAM: Is that something that's in the works?

DEPUTY WARDEN TOMA: That's something that we have discussed. Like we said, we're working as we do this move to physically complete the inventory of the facility. We already have a significant amount of books inventoried, but because of the transient nature of our population and the books, that inventory that we currently maintain may not be accurate for us to be able to post anywhere for it -- for people to request specific book titles. That's why we only allow for genres of books.

MS. HALLAM: But we've heard it referenced numerous times, the 20,000 books. So how do you have an inventory to know that but not to know what you have?

DEPUTY WARDEN TOMA: Because I can physically walk downstairs and $I$ know the amount of books on the shelves and $I$ can look at the books. So I'm kind of confused.

MS. HALLAM: I can't look at books and tell you there's 20,000 there. Is that just a guesstimate that you've been giving us?

DEPUTY WARDEN TOMA: No. We physically have inventoried the books at one point in time.

MS. HALLAM: So then why don't you have the list of titles?

DEPUTY WARDEN TOMA: We do have that list of titles, as $I$ mentioned, but it's in a -- we do not currently have the ability to export a CSV or $X L$ file from that system, and that's one of the other issues that we're working on as $I$ previously stated.

MS. HALLAM: Man, I don't know if we just have the most antiquated technology in the world in this county. This just seems like it's being made so much more difficult than it really is. Like if people want to request a book, they say $I$ want -- you keep saying genre. I want -- $I$ know that my family tried to send me Animal 1, 2, 3. Why can't $I$ put in a request to get Animal 1,2 , 3 ?

DEPUTY WARDEN TOMA: We might have one copy of that book in the facility, and it's
already located and not available. So again, we do -- we are not designed to track a book to a singular level and it to stay there. That individual could also move once it's given to them from a housing unit to a housing unit and then pass it amongst themselves, so we cannot...

MS. HALLAM: They have a unique identification number called their DOC number. You could very easily track it. There's a barcode on their wristbands, and you can very easily track who has what books, like a bar -like a library card.

DEPUTY WARDEN TOMA: But if a book itself can be passed around and not with -- no longer with that individual.

MS. HALLAM: Not if they own it as theirs that they took out, just like a library card does. It's not like when $I$ go and get a book from the library, it gets implanted with a chip that says Bethany Hallam has this book.

DEPUTY WARDEN TOMA: They're all really great points, and it's something that we're looking at as part -- as we go onto this process. Right now, we have established these ones, and we're working to make the current
procedures that we have implemented sustainable, measurable, and we can improve upon them.

I absolutely agree there's areas for us to improve, and we'll work towards those other areas. But right now, what we've already identified as the best course of action, we want to make sure that those are sustainable, and we continue to be able to meet and fulfill those procedures that we've established.

And $I$ completely agree with you that, in time, we'll be adding to other processes and procedures within the realm of books.

MS. HALLAM: Did you consider that maybe a solution would be that like the members of the Jail Oversight Board could have input in it? It just seems like you keep coming with these things that you're saying you're doing to address problems, but then it never happens because it's never done the way that we've heard and we know it should be done.

DEPUTY WARDEN TOMA: Actually,
Ms. Hallam, I believe you're going to chair the book review committee --

MS. HALLAM: Uh-huh.
DEPUTY WARDEN TOMA: -- from the
next meeting, so I look forward to being invited to that committee to hear your ideas and thoughts with the other members.

MS. HALLAM: Will you come and
listen?

DEPUTY WARDEN TOMA: Absolutely.
MS. HALLAM: All right. Cool.
I'll put you down.
All right. Am I allowed to keep going? Should I just like try the questions?

DEPUTY WARDEN TOMA: Sure.

MS. HALLAM: Just to make sure -see if you could consider them? Okay.

Can you speak at all to the mental health tiers?

DEPUTY WARDEN TOMA: No.

MS. HALLAM: Okay. Can you speak at all to -- okay, you can't speak at all to that. Okay.

Oh, yeah. You talked about the healthcare successes. And again, I'm super interested in that because the level of detail we're getting in your like puff-piece reports is so much more than the level of detail we're getting about people being sent to the hospital,
medical emergencies, people dying. I just can't figure out why you can come and talk about healthcare successes, again not saying anybody's name, not saying any personally identifiable medical information, but to just come here and talk about specific incidents? Why can't we do that for people getting rushed to the hospital, people dying in the jail?

DEPUTY WARDEN TOMA: I would have to defer back to Dr. Brinkman since she is the Health Service Administrator and is responsible for that unit.

MS. HALLAM: Okay. I held my questions while you were gone for you. So I do have a few for you. But thank you for your answers.

Okay. Are you ready? I just wanted to let you get situated. Are you sure?

DR. BRINKMAN: Okay. All right.
MS. HALLAM: Thank you so much. So I have a couple of questions based off of some of the things that you had mentioned. The first thing is about the folks on Mental Health Tier IV, IV and $V$ specifically. And so, you know, $I$ keep referencing back to like the solitary confinement ban, the referendum that was passed that the jail must comply with, and it's very clear that, you know, if someone is in the -- their cell less than four hours is allowed out of their cell, less than four hours a day by definition of the law, they are in solitary confinement. But we know that people on those higher level mental health tiers are not getting at least four hours out of their cell every day. So there are, you know, exceptions listed under the referendum, but none of them are being reported on this person was held in solitary confinement because of their mental health tier classification.

DR. BRINKMAN: I'm pretty certain we are reporting those who are not -- am I wrong -- we are reporting those by the 5th, right?

WARDEN HARPER: By the 5 th of the month.

DR. BRINKMAN: Uh-huh.
MS. HALLAM: No, what I'm talking about is including the people who are being held in solitary confinement because they are on the mental health tiers, because it says that no
person, no person at all, regardless of mental health tier, may be held in emergency or short-term solitary confinement unless the Warden has made and documented an individualized determination of the necessity for this person's confinement.

DR. BRINKMAN: Uh-huh.
MS. HALLAM: I mean, you know all
of these reasons because we brought them up a bunch of times. But when I look at the report of the people who are in solitary confinement each month, $I$ don't see any of these classifications listed there.

WARDEN HARPER: For the last couple of months, the institution has been on split recreation. So therefore, nobody in the facility has been receiving the four hours of out-of-cell time. So Chief Beasom, do you want to talk a little bit about that?

MS. HALLAM: The whole jail?
You've had the whole jail in solitary for the last few months?

WARDEN HARPER: Hold on, ma'am. Hold on.

CHIEF DEPUTY WARDEN BEASOM: It's been the -- it's been the same recreation process for the last several months under COVID mitigation. Half the tier -- half the housing units at a time are out for recreation. When they go in, the other half comes out.

MS. HALLAM: Right. But, you know, math-wise, there's 24 hours in a day. Why is that prohibiting people from getting four hours out of their cell a day?

CHIEF DEPUTY WARDEN BEASOM: We only have movement until the 8:00 count, 8 p.m.

MS. HALLAM: Okay. So from what, 7 a.m. to 8 p.m.?

CHIEF DEPUTY WARDEN BEASOM: 7 a.m. is when we start our breakfast feeds, medication pass, then we start recreation. And then we get into the 11 a.m. count, lunch, afternoon shift change, count again. So there's things in between those hours.

MS. HALLAM: That takes up 12 hours, right? So if each person needs four hours and you're splitting rec, all you need is eight hours in a day to make sure that every person on every pod gets four hours out of their cell.

CHIEF DEPUTY WARDEN BEASOM: And we get them out as much as we can.

MS. HALLAM: But you just said that no one has gotten four hours out of their cell in the past two months.

CHIEF DEPUTY WARDEN BEASOM: I
don't believe I said that.
MS. HALLAM: Someone just said that. I didn't imagine that. That was literally just said. Was it the Warden?

WARDEN HARPER: We've been on split recreation for the last couple of months. So under the split recreation guidelines, I thought we are reporting that the facility, the majority -- the facility was not getting the four hours.

CHIEF DEPUTY WARDEN BEASOM: We get them as much out of cell time as possible, yes.

MS. HALLAM: Okay. So that's wild, but $I$ will go back to my line of questioning, specifically about the tiers. So -- but even when you're not on split rec, people on Tier IV and $V$ are not getting four hours out of their cell?

DR. BRINKMAN: One of the exceptions is a medical emergency and -- and the Tier IV and V is something that is clinical in nature. So we're talking about somebody that, as a result of their medical crisis, they are not safe to be outside. So this would be similar to somebody who is in Forbes Hospital under a 72 -hour observation because of a 302. These are people who are unsafe because of their medical diagnosis and status, that it is not safe for them to be outside of their cell because they have an imminent risk of harm to self, others, and things like that.

MS. HALLAM: Okay. Now you are correct, it is for emergency, but very clearly it's emergency or short-term solitary confinement. So that means for a short-time emergency somebody needs to put in -- be put in solitary confinement. These are people who, because of a classification that was assigned to them, a mental health classification, they are in solitary confinement.

DR. BRINKMAN: But no, it's based on a clinician's assessment. It's not based on a security classification or anything like that. It is -- it is based on a clinical assessment that has found that they are not safe to be
outside of their cell and have access to the things that other people would have access to.

MS. HALLAM: But you referenced Forbes Hospital. Forbes Hospital, they're allowed to leave their room.

DR. BRINKMAN: Not at all levels of care.

MS. HALLAM: They are not locked in a cell for 24 hours a day at Forbes Hospital. I am positive of that. I have been there.

DR. BRINKMAN: Okay. I don't know what you --

MS. HALLAM: I just want to -- man.
Okay. I just feel like I'm not asking for much. I just very much want to make sure that we are not discriminating against people with mental health diagnoses and disabilities, and that is what it seems like the more and more I learn about these tiers. It very much seems like that, and now it's seeming to overlap with the violation of the referendum, which we know has been going on since it was passed.

DR. BRINKMAN: I do not believe that it's a violation of the referendum, and maybe -- maybe it's the way we understand it.

MS. HALLAM: So this was -- I just want to like bring up for the rest of the Board, this is the reason why we need our own solicitor here on the Jail Oversight Board because in they're claiming they're not breaking the law. The only legal person who is here is for them. We need a solicitor to help us tell them if they are breaking the law. Are they allowed to give us the information they're giving us? We need somebody to do that. So I don't know if anyone else wants to like meet with me after this and figure that out, but this is -- it's truly a conflict that the only legal opinion that is ever given in these meetings is the County's own lawyer.

JUDGE HOWSIE: Do you have any other questions? Can we move to another question?

MS. HALLAM: Okay. Well then we shouldn't meet only once a month, and $I$ wouldn't have this many questions every meeting.

Yeah. So the next thing is can you describe when people transition from different medications for opioid use disorder what that
looks like, because $I$ know people are transitioning to different medications are on or off? What does that transition look like?

DR. BRINKMAN: So most often, the only time it would be was from an oral Suboxone to the long-acting injectable of Sublocade. So the prescriber would be working with them to determine what that dosing looks like.

MS. HALLAM: Okay. So it's just dosing. It's not like anything like people -are people going through withdrawal or people.

DR. BRINKMAN: No, no.
MS. HALLAM: There's no like kind of lag time when you're switching from one med to the next?

DR. BRINKMAN: I think that would be experienced of any kind of dosing adjustment. So it's no different than any other dosing adjustment you would be going through. So you're just changing the -- the method, the root of administration.

MS. HALLAM: Okay.
DR. BRINKMAN: Oral to long-acting injectable.

MS. HALLAM: Okay. What about --
you had referenced about the competency -- I think it was last meeting, the competency restoration pilot program, that there was an RFP for that. Can you give us an update on that?

DR. BRINKMAN: I know that it's being managed by DHS, so I don't know the state of where that RFP is.

MS. HALLAM: Okay.
DR. BRINKMAN: I just knew that --

I know that Torrance State Hospital commitment is something that we're all passionate about, and I wanted you to know that $I$ became aware of that RFP.

MS. HALLAM: Okay. Bless you.
The next thing is about the BC
holds. So I know we have gotten reports about the number of people that are on BC holds, but I'm wondering if we can somehow get a more detailed list, like this person has a behavior competency hold, and they have this charge? I'm trying to see the correlation between BC holds and what charges they're being placed on people for.

DR. BRINKMAN: We don't place them on the BC holds. All that $I$ - -

MS. HALLAM: I thought you guys do the evaluation to determine?

DR. BRINKMAN: No, we don't. No. Pretrial Services does that. It's a third-party objective psychiatrist. It's not my healthcare department.

MS. HALLAM: They come into the jail and provide a healthcare assessment, but it's not through us, through the jail?

DR. BRINKMAN: It's specifically intended to be a third-party objective so that there's no -- no way that there is any influence on what the outcome of that evaluation is.

MS. HALLAM: Okay. So if I want a list of $B C$ holds, the only place that holds that is Pretrial?

DR. BRINKMAN: They communicate to us who they placed on a hold.

MS. HALLAM: And you know the person's charges that are in your jail.

DR. BRINKMAN: In healthcare, I don't explicitly look at every person's charges.

MS. HALLAM: Right, but you have access to it. So you know who has a BC hold, and you know what that person's charges is -- are.

DR. BRINKMAN: Yes, but the most efficient way to get that information, because I would have to be looking up every individual. I don't -- I don't track that in the way that they do because I'm only looking at how can we facilitate getting them to Torrance. So the most efficient way for you to get that information is definitely through Pretrial Services.

MS. HALLAM: Yeah. My only problem is I'm not on the Pretrial Services Oversight Board, and $I$ know that it's something that's happening at the jail. So I can ask them, but if there is any like problem with it, can I tell them to talk to you or work with you to figure out a way to streamline it?

DR. BRINKMAN: I can try.

MS. HALLAM: Okay. So do you even have a list of who has a BC hold in the jail? Because $I$ know if $I$ call the jail, they'll tell me that, but $I$ don't know everyone or how many.

DEPUTY WARDEN TOMA: I can bring it with me.

MS. HALLAM: Yeah. You have it. Is that something that you can provide to us?

DEPUTY WARDEN TOMA: Not with the
patient information.
MS. HALLAM: No, I don't need the patient information; just this person has a hold. That's not HIPAA. That's a legal designation.

DEPUTY WARDEN TOMA: I'll find out if I'm allowed to, yes.

MS. HALLAM: Okay. Thank you.
The next one, and this might be you -- yeah -- we had asked at the last meeting -- you had said that you were going to short tracking uses of force by housing pod and that you were going to bring that to this meeting and report on it and $I$ didn't hear it in the report.

CHIEF DEPUTY WARDEN BEASOM: We were talking about the document retention system at the last Board meeting, and I said I was going to find out if it is tracked by individual housing units and it does.

MS. HALLAM: Right. And you said you were going to bring those breakdowns to us.

CHIEF DEPUTY WARDEN BEASOM: I absolutely did not say that.

MS. HALLAM: If you read these meeting minutes --

CHIEF DEPUTY WARDEN BEASOM: I said I looked, and I could see if Onbase, where we put all of those incident packets, has the ability to break it down by housing unit, and $I$ did. And it does break it down by that.

MS. HALLAM: Correct. And you said that last meeting. I was just reading about it. You said that last meeting, and that you were going to bring those numbers here today.

CHIEF DEPUTY WARDEN BEASOM: I reported on the use-of-force numbers.

MS. HALLAM: Not by housing pod.

CHIEF DEPUTY WARDEN BEASOM: No.

MS. HALLAM: Right. That's what you were supposed to bring here today.

CHIEF DEPUTY WARDEN BEASOM: That's not my recollection of what $I$ said $I$ was going to bring.

MS. HALLAM: Okay. There is a video on YouTube and the verbatim meeting minutes are in the packet if you want to read it, but can we try for that for the next meeting then?

CHIEF DEPUTY WARDEN BEASOM: Sure.
MS. HALLAM: Okay. I would
appreciate that very much. I just --

CHIEF DEPUTY WARDEN BEASOM: For what time frame?

MS. HALLAM: Like when you give our monthly report on use of forces, those six, I would like to say this is the total number, and this is, you know, a breakdown by housing pod. You can put it in here if you want.

CHIEF DEPUTY WARDEN BEASOM: For our January report, you're asking for the number of use of forces and what housing unit they occur?

MS. HALLAM: Correct. There were 15 on this pod; there were 10 on this pod. That would be very helpful to like follow that going forward.

CHIEF DEPUTY WARDEN BEASOM: I can do that.

MS. HALLAM: Thank you very much. Another thing is -- wait. Maybe that's it. Oh, no. Okay. So whoever wants to answer this one.

Something that $I$ have been wondering a lot about is, you know, $I$ know people are still going to, I guess it's 4-B is like the COVID quarantine pod for everybody that comes in. Is that right? That's what it is, the intake
pod? Everybody has to go there and like quarantine before they can go into gen pop?

DR. BRINKMAN: It's one of the intake housing units, yes.

MS. HALLAM: Okay. But is that like -- are they still being quarantined for a certain amount of time there as a result of COVID?

DR. BRINKMAN: Yes. That mitigation effort is still in place. And like I mentioned earlier, yesterday there were some new guidelines that were released by the CDC, so --

MS. HALLAM: I just didn't hear you say what they were.

DR. BRINKMAN: We're still reading. It's a long document.

MS. HALLAM: Oh.
DR. BRINKMAN: So we're still
reading it to see how -- because like I said, it just came yesterday, and for this meeting, that's a lot to be -- have ready.

MS. HALLAM: Okay. I get it. I get it. Is there somewhere like online? Can I see it? Is it on the CDC website?

DR. BRINKMAN: Yeah. Honestly, all you need to do is Google it.

MS. HALLAM: Is it the same thing that $I$ have been following in like, you know, since COVID started, like the congregate care setting guidelines?

DR. BRINKMAN: Correctional. Yeah, correctional settings.

MS. HALLAM: Okay. I'll check that out. So then I can -- I can read it. And your policy on what -- because $I$ was going to ask, you know, questions about the procedures and everything. Are you going to just follow their recommendations for the policy going forward?

DR. BRINKMAN: Theirs are pretty general typically, like, even from the get-go of the whole pandemic. So we follow them in -sorry.

MS. HALLAM: I know you can handle it. That's why I asked for it.

DR. BRINKMAN: No, no. He's just reminding me. That's all. He's being -- he's being my partner.

AHN as -- since they oversee a lot of our services as well as the county Health Department. So we take all of that information
to see what makes the most sense.
MS. HALLAM: Okay. I appreciate
that. I will look through that. I actually
didn't know about that either. Was that my last question? Yeah. I can't remember. I really did have one more. I just can't think of what it is.

JUDGE HOWSIE: Thank you very much for your report.

MS. HALLAM: Thank you.

## OLD BUSINESS

JUDGE HOWSIE: Ms. Hallam, any Old Business you wanted to discuss? A conversation with the Warden for work performed by incarcerated individuals? Do you have an update?

MS. HALLAM: No, I don't have an update. I think you just keep putting it on the agenda every month, but that's cool.

I don't have any update at all
since last time. The -- I mean, I think the -most of the questions are answered about logistics. I -- you know, when $I$ was there, I went for a visit on Thanksgiving, and when $I$ was there -- and we went with council.

Oh, I do have one more question, but I'll say this first -- and when we went with
council, we went and saw where the units are, the Novatime, like actual timekeeping things. And it's -- I think $I$ reported on this the last time about how it's biometric plus a number, so they could use their DOC number plus a thumbprint.

But $I$ truly think that unless anyone else from the Board has any additional questions to help inform their vote on, you know, starting this pilot program, any other information anybody wants or requests that $I$ gather or $I$ bring to you in order to make a decision on that, I'm not sure what else we're waiting on from me.

Do you have any -- like, is there anything anybody wants to know about it, or should on the next agenda be a vote to pay the incarcerated workers? Because we have figured out from the payment side of things. We have figured out from the portal, like the actual timekeeping side of things. I have talked to the IRS about the tax implications. We have state law to follow regarding disbursement. Like, they don't get all their money. They actually get one-third, restitution; victims, dependents get portions of their pay. I mean, I think I have
all the information unless anybody else tells me they need something else to support this. And we're going to do it as a pilot out of the Incarcerated Individuals Welfare Fund at the beginning.

If all goes well, we can budget for it next year.

Mr. Pilarski, do you want to say something into the microphone?

JUDGE HOWSIE: I think there's
probably a concern -- there are a lot of questions that I'm sure that remain unanswered, at least $I$ haven't been told of any answers regarding what if a person -- just for instance --

MS. HALLAM: Uh-huh.
JUDGE HOWSIE: This is just for instance. What if a person is receiving benefits and they get paid and now they've exceeded the amount of money they can earn and it negatively or adversely affects their benefits? What do you do with that? What do you do when a person is released from --

MS. HALLAM: I know.
JUDGE HOWSIE: These are just
hypothetical -- I mean, rhetorical questions. What happens if a person leaves the jail and they've been paid, how do you get them a $W$-2? How does a person who is receiving welfare report that income and not exceed the amount of money that they can make, which might potentially subject them to criminal prosecution for welfare fraud?

So there are a lot of questions I think that need to be discussed that $I$ don't know that we've all gotten answers to those questions.

MS. HALLAM: That's the first time I've been asked those questions. I would be more than happy to get those questions answered if you want to send me a list. I have three right now.

The release thing, they would just provide an address. That's something we actually -- I had talked about. But yeah, if you want to provide me those list of questions.

JUDGE HOWSIE: I understand that they will provide you a release. My experience working in the court briefly has been that information that a person provides from the moment of arrest until sometimes just their next court date changes. So to think that because
they've given you information, they've given you a phone number, that information will be valid a year later when it's time to supply people with a W-2, I don't know that that's realistic.

MS. HALLAM: That's true with any employment.

JUDGE HOWSIE: So there are a lot of questions we have to answer. We can keep moving.

MS. HALLAM: Does anybody else have any questions that they would like me to bring answers to for the next meeting or ahead of the next meeting about this proposal specifically, any questions or concerns you have?

JUDGE HOWSIE: I think -- I thought that the plan was for you to get as much information so that you could update us regarding --

MS. HALLAM: I've been doing that every meeting, Judge Howsie.

JUDGE HOWSIE: But it's saying here that no one has answers to these questions. So clearly, we haven't been updated.

MS. HALLAM: Because you haven't
asked me. I've been bringing you all the answers
to all the questions that have been asked. JUDGE HOWSIE: Fair enough. MS. HALLAM: And then I add. I will bring these next meeting. I promise. JUDGE HOWSIE: Thank you so much. MS. HALLAM: You're welcome. JUDGE HOWSIE: We've gone -MS. HALLAM: I have one more question $I$ forgot to ask. I think it's you. I think. But I have gotten reports from folks -- we actually even heard public commits about it today. I know my colleague who is in attendance today also got complaints that people are leaving the jail, whether they're going to alternative housing like I think the public commenter's partner was, or they're going out to the streets, and they are not -- they don't have -- they don't know what medications they were on, they are going to other facilities, they aren't receiving their medications, sometimes they're coming into the jail, and they're waiting weeks and months without their medication. And $I$ know that it's not a one-off because $I$ have heard it from multiple people and other people have as well, including people who have come here to comment. So I'm just wondering if we could talk about what that procedure is. So if I get arrested today -- which let's hope I don't, but if $I$ do, what happens to find out what meds I'm on? If I get released today, what happens to get me my meds going out the door? I know we were told when we went on our council visit a couple weeks ago that they are given like a little -what are they called, them little blister packets of the meds that they were given in the jail? It just doesn't seem that that's happening to everyone, and it seems like the issue is even more prevalent whenever they're going to a different, like alternative housing facility or rehab, something like that.

DR. BRINKMAN: So when somebody comes into the facility, we have a verification process that's built into our health record that will run any of the pharmacies that they have been -- typically someone will say, yeah, I go to the Rite Aid on whatever street -- so whatever meds have been filled at the pharmacy that they had current active orders for. Now we won't go back endlessly in continuation of medications,
but any of the most recent meds that they have been taking and filling prescriptions for.

MS. HALLAM: How far back?
DR. BRINKMAN: We go back a month.
MS. HALLAM: Some people only get their meds filled every 90 days.

DR. BRINKMAN: If it was a 90-day supply and it was filled 80 days ago, 90 days ago, then we would continue it. It depends on it being an active script.

MS. HALLAM: Okay. So if someone hadn't been on their meds for a couple of months -- let's say maybe they were experiencing homelessness, let's say, you know, they were on the run, anything like that?

DR. BRINKMAN: If they didn't have an active script that they were filling, then we're not continuing it automatically, and they would get -- they would be -- have to be reevaluated to see what meds make sense for their current medical conditions.

MS. HALLAM: If you skip a month, is your prescription no longer active?

DR. BRINKMAN: If you haven't filled them? Right.

MS. HALLAM: So like if I get a med every month, I missed one month, is my prescription immediately not active?

DR. BRINKMAN: We wouldn't have a record to verify it, so we would have to do --

MS. HALLAM: Man.

DR. BRINKMAN: -- we would have to do an evaluation to see what the current state of your medical condition is.

MS. HALLAM: And then you do that, and then what's next? You figure out all these things that they need.

DR. BRINKMAN: Then the medication orders are put in. We work with a pharmacy that delivers medications daily, and then we would be able to deliver those on your med pass once they're received.

MS. HALLAM: Can folks self-report medications to you? If you aren't seeing it and they say $I$ need this medicine, what do you do to look into it to see if they actually are supposed to have it?

DR. BRINKMAN: We wouldn't -- we would be looking to find out where they're receiving their medications from, and trying to get verification for either the pharmacy or the provider.

MS. HALLAM: Okay. And then how long are they waiting for that from the time they get arrested to the time they receive that medication? What would you say is the span of time?

DR. BRINKMAN: If we're not able to verify it, we would have to try -- we would have to be doing an assessment to see what we can prescribe based on what we're seeing, our providers are seeing.

MS. HALLAM: Okay. And then -- all right. So then they get their meds. They're on it. They're in jail. Now they're leaving jail and they're like what did they give me?

Because I know also sometimes there are drugs that people have active prescriptions for that the jail does not allow to be administered to them.

DR. BRINKMAN: Right. There are. There are some medications that we do not continue because of the abusive nature of those medications.

MS. HALLAM: And so what do you do for people who are on those medications and have active prescriptions for those medications?

DR. BRINKMAN: The providers would be reviewing for therapeutic alternatives.

MS. HALLAM: Is that the
prescribing provider? Is that the jail providers?

DR. BRINKMAN: Jail providers.
MS. HALLAM: Okay. So basically, the jail providers are, in a sense, overruling what the prescription provider had prescribed them?

DR. BRINKMAN: It's not necessary that it's an overrule. It's a fact that there are some things that are not safe in jails because of the nature of the correctional environment. So we look for therapeutic alternatives, things that they consult with the pharmacy to say, what types of medications are appropriate substitutions.

MS. HALLAM: Okay. And then I get my appropriate substitution, and now I'm going to leave jail. And so $I$ was taking these drugs before I got to jail. The jail switched me to these drugs. What happens now when I go to
leave? Am I getting back on these drugs or these drugs? Like what are you?

DR. BRINKMAN: So when you're getting ready to leave, we -- we get up to two days' notice when you're leaving. So we're working with our pharmacy to order a supply so that you can go home with those medications. When they come in, then we bring that supply to intake, which everyone leaves physically through intake.

MS. HALLAM: Okay. So -- and how would an instance happen where someone was on medication in the jail and did not leave with it in their hands?

DR. BRINKMAN: If it didn't arrive in time by the time they physically walked out the door.

MS. HALLAM: Okay. And like you didn't want to keep them just to give them their meds, so they left and didn't leave with their meds?

DR. BRINKMAN: Right.
MS. HALLAM: Okay. Is there any other instance that you can think that would happen?

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| 1 | DR. BRINKMAN: Not an intentional |  |
| 2 | instance that I can think of. |  |
| 3 | MS. HALLAM: Okay. And then how |  |
| 4 | often does that happen? |  |
| 5 | DR. BRINKMAN: I don't -- I don't |  |
| 6 | actually know that. With -- like -- I don't have |  |
| 7 | numbers to support and give you any accurate |  |
| 8 | information. |  |
| 9 | MS. HALLAM: Okay. That's all. |  |
| 10 | Thank you. |  |
| 11 | JUDGE HOWSIE: Can 1 have a motion |  |
| 12 | to adjourn? |  |
| 13 | SHERIFF KRAUS: Motion to adjourn. |  |
| 14 | JUDGE HOWSIE: Happy holidays, |  |
| 15 | everyone. Stay safe. See you in the new year. |  |
| 16 | (The meeting concluded at |  |
| 17 | approximately 7:40 p.m.) |  |
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| 1 | C E R T I F I C A T E |
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| 3 | I hereby certify that the |
| 4 | proceedings and evidence are contained fully and |
| 5 | accurately to the best of my ability in the notes |
| 6 | taken by me via an audio recording of the within |
| 7 | cause and that this is a true and correct |
| 8 | transcript of the same. |
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Sincerely,

Cocy O'Connor

