

The monthly meeting of the Allegheny County Jail Oversight Board was held on Thursday, June 3, 2021 held as a virtual conference at 4:00 P.M.

**MEMBERS PRESENT**

**Ms. Hallam:** Present

**Ms. Klein:** Present

**Judge Lazzara:** Present

**Ms. Moss:** Present

**Sheriff Mullen:** Present

**Ms. Parees for County Executive Fitzgerald:** Present

**County Controller Ms. Wagner:** Present

**Others in Attendance:**

Warden Harper

Deputy Warden Williams

**1. Welcome, Call to Order and Rules**

**Judge Clark:**

Good evening everyone and welcome the monthly meeting of the Allegheny County Jail Oversight Board. I just want to remind everyone that we do have rules, even in a virtual world, of how these meetings are to occur. The number one and most important rule is that everyone in this meeting will be treated with dignity and respect there are no exceptions to this rule. We would just ask everyone to be orderly and polite and make sure that everyone has an opportunity to be heard. So again, just to reiterate, everyone will be treated with dignity and respect.

**2. Presentation – RIVER Clinic**

**Judge Clark:**

Lately we have been starting our meetings with the presentation. Our presentation this afternoon is from the RIVER clinic. Divya Venkat is here and I would ask Deputy Warden Williams to give a brief introduction before the presentation.

**Deputy Warden Williams:**

Thank you so much your honor. Today we are happy to announce and I will have one of the experts and truly somebody who has been at the forefront of advocating for post incarceration continuation of care for a very long time. Divya has worked with our institution and inside our institution but she is employed with AHN. Through collaborative efforts, and a lot of innovative thinking, they have developed ways to continue to serve a necessary population without stigma, bias, or judgment in the community. So, if you do not mind Divya, we would love to hear from you.

**Ms. Venkat:**

Thank you for that introduction. That was really flattering. We are really excited about this clinic. Let me share my slides. We are so excited to be introducing the RIVER clinic, which stands for Rethinking Incarceration and Empowering Recovery. The objectives of this presentation will be: Number 1, to describe the necessity of a post-incarceration care model in healthcare; 2, to show the data from previous transitional care models; and 3, to explore the CIH RIVER Clinic model and its effects on Pittsburgh's healthcare landscape. A lot of this beginning information is probably things you all know but I am just going to go over it to kind of tell you what we are trying to target. As we all know, incarceration has massive and profound public health effects. A criminal record limits a patient's ability to be employed and access to things like education. It also limits access to adequate health care. Due to legal concerns, previously

incarcerated persons have limited access to safety net programs, such as snap benefits. The age adjusted income of those who have been incarcerated is 41% less than those who are not, which shows an intricate link with poverty. More than 5x as many black persons and 3x as many Hispanic persons were incarcerated than white persons in 2015. This is just some rates of incarceration. Obviously some of this is a bit outdated and has changed quite a bit with COVID but as you can see since the 70's, 80's, and late in the 90's is when really we saw this explosion in mass incarceration. In Pennsylvania, we have seen this massive increase in prison and jail incarceration rates. This obviously was affected by COVID when we saw a massive release of people who were incarcerated for the benefit of people not spreading COVID-19 but as you can see the number is still quite large. Unfortunately, as you can see on the right-hand side of the screen, this is predominantly black and Latino persons. So why is this a public health threat? Because there are higher rates of chronic disease, which I am sure many of you see on a daily basis. Incarcerated individuals have 5x higher rates of Hepatitis C and HIV. Again, this really picking a specific population, which is probably why, but it also shows it is necessity of treating these diseases. Two-thirds of those in correctional facilities have a substance use disorder. Exposure to corrections is associated with significant mental health effects and Medicaid benefits are often not reactivated after incarceration. Although, we know that is a different situation with ACJ. In 2016, the mortality rate in jails all over America was about 1/6 higher in the general US population and upon release individuals are at a 100 times risk of opiate overdose. More than 12 times higher of dying of any type of cause within the first 2 weeks after release. So what is the Post-Incarceration Care Model? As many of you probably know, less than 20% of those who are released from any type of partial facility in America are likely to see a physician outside of the emergency department within the first 12 months. That is an alarming number. Patients are often referred, so through this model we are hoping that patients are referred to our clinic directly from incarceration prior to release to ensure quick and smooth transitions of care. Medical records are obviously to be shared in a HIPAA compliant method and to ensure continuity of care. In our clinical we are providing primary care, substance use disorder treatment, Hepatitis C treatment and a full-time access care team. So, what does a post-incarceration care model look like? When someone is incarcerated, we may know a few days or maybe a few hours ahead of when they will be released. From that, we would like to transition people directly to our clinic via direct referral from the jail from either a social worker or a nurse within the jail to our clinic. Once contact is made with the clinic and people are released from incarceration they will have immediate access to a number of different things: health care providers, a community health worker, a social worker, a nurse navigator and hopefully a behavioral health clinician in the coming year. These models have existed before. We are not the first one and we are not unique. There is something called the Transitions Clinic in San Francisco which is truly the first unique model. What they found with people who are participating in this model are less likely to visit the emergency department and has 50% fewer emergency department visits. That is important because we all know that while the emergency department serves a very important purpose in our health care system it is not where you are going to get continuous care model. This actually resulted in \$912.00 less per year spending in healthcare cost utilization. More than half of the participants in this clinic had at least 2 primary care visits after release and engagement within the program. They also saw significant reductions in illicit drug use and overdose, criminal behavior, recidivism and even mortality. Those are striking numbers, I think. Why will we be successful? Well number one, we are really lucky to be part of the Center for Inclusion Health, which is already so embedded within the Pittsburgh community with access to so many resources. Our healthcare network has also been fortunate to have existing relationship with ACJ. Our patients are currently admitted during incarceration to hospitals within our healthcare system, so we already have a lot of the preexisting data. Our AHN providers are actually providing health care within the jail allowing for a warm hand off on release. So, what are our goals and why do we want to do this? Our number one goal is to ensure access to health insurance and social services after release. This can be so difficult, healthcare is obviously so difficult to navigate, even someone who has been injured and been a part of the health care system. We want to provide comprehensive care to recently incarcerated individuals who face multiple social determinants of health. As we all know, meeting in a cultural setting can be so complicated for a number of reasons: having housing, food, security, and just a warm place to go back to. We would like to treat a variety of health care conditions including diabetes, substance use disorders, Hepatitis C, STI treatment and prevention, behavioral health, and women's health. We would like to alleviate the social determinants of health by engaging with in-clinic social workers and community health workers. Our ultimate goal is to transition these patients to long term primary care providers after engagement within our clinic. How does this work? This is a very messy diagram, but I am

going to bring it down for you. So again, patients will be pending release from incarceration. We currently work very closely with two people within the jail, Rene from social work and Chelsea from discharging release. We have developed a really good relationship with them and multiple people within jail at that matter. We have been working with them to create this referral process. Our nurse navigator who has been hired, her name is Marcy, and she is wonderful. She is going to be embedded within ACJ but currently working on our clearances right now. Once the nurse navigator is notified by the people at ACJ, which is currently Chelsea and Renee, they work on making sure that the patient has an appointment within our clinic. She should notify the RivER Clinic team and she sends the patient records with consent. An appointment will then be made within 72 hours of release. We think 72 hours is super important. Number one we know that there is a lot of data that within the first two weeks of release we are seeing a lot of morbidity and mortality and overdoses. The 72 hours is also when we think we will really capture social determinants of health to make sure that people have access to housing, food and honestly whatever else they need. We want to make sure that we are getting to people fast, so they feel like they have a community to come home to. Our community health worker, her name is Carol and she is also great. She reaches out to our patients prior to their appointment to complete intake assessment and help with any transport needs. We imagine this model existing where Carol can actually meet people right outside of ACJ on release or whatever makes sense for that patient. When the patient arrives to their appointment, they will see Carol again who will give them a warm hand off to make them feel like they are at home within our clinic. Access health care providers, which is Dr. Robertson and I, will complete initial appointment and assess any chronic needs or conditions. There will be continued engagement within healthcare. After three months in our clinic we hope to transition them to a primary care setting that makes sense transportation wise for that patient, including a local federally qualified health center. We have not hired a social worker yet, but we are working on that. We would hope that the social worker would complete initial social determinants of health needs and really just help navigate a really complex social system out there. What are our outcomes? We really hope to work on some really broad topics which include reducing hospitalization and emergency department utilization within the first year. We want to show cost savings by engaging patients in primary care. We want to treat and eradicate Hepatitis C in referred patients and reduce opioid overdoses. We want to increase use and retention in medication assisted treatments for opioid use disorder. We want to reduce recidivism by providing people with things like housing, jobs, and just the opportunity to really succeed after incarceration. To enable engagement in social work and show reduction in social determinants of health needs surrounding incarceration. Our specific metrics that we are looking at are: decreasing ER utilization in the population by 50% within the first year or two; decreasing recidivism by 25%, from around 80% to 55%; maintaining or initiating 50% of patients with opioid use disorder on MAT; decrease relapse on illicit opioids by 50%; distributing naloxone, which is a lifesaving medication, to 90% of patients; decreasing opioid-related deaths from 21% to 10%; and screening 90% of patients for HIV and Hepatitis C, that would be around 450 patients. Again this is just more things we are interested in: treating eligible patients for Hepatitis C; enrolling patients into health insurance; transitioning patients into primary care; screening 100% of our patients for social determinant of health needs with follow up appropriate referrals; and increasing are CDC Healthy Days, which is a really important metric for most clinics. I want to quickly talk about our soft launch that actually started today, which is really exciting. Our Nurse Navigator, Marcy, and our Community Health Worker, Carol, were hired at the end of March, beginning of April, and they have been so hard at work making sure that they are already talking to Chelsea and Rene within the jail. They actually started connecting quite a few patients who were previously incarcerated to get other care outside of ACJ. In one specific instance, there was a patient being released from ACJ that had lung surgery and needed immediate transitions of care right after ACJ release. Rene coordinated with Marcy and Marcy was able to ensure that this patient first came to the hospital when they weren't feeling so well at home and then ensure this patient had access to home care, which can be so difficult to set up for some patients. There was another person that Carol worked with very closely. She ensured this patient had access to health care benefits quite immediately including food stamps. These are just two instances out of at least ten that they really worked with patients already. Today we actually did our soft launch which is even more exciting. On Tuesday and Thursday afternoon we have an ambulance parked near ACJ. The patients can be referred directly from the jail to our ambulance. This is to ensure access to medications and treating for social determinants of health right from release. Again, that would be collaborating really closely with ACJ staff. We are still working on whether the afternoon time is going to be useful because I think we are finding more patients are actually released in the morning and in the evening. We will be working on that timing and

I will be sure to update all of you on that. As far as actual clinic time, we are going to be stationed out of Federal North just for a little bit here on Friday mornings. We will see actual referrals in person. We will ensure that we see the people who are really having a lot of medication needs. Just so you know, the patients that we see on Tuesday and Thursday afternoon, we are creating a list of patients to ensure that they have appropriate access to care afterwards, whether it is prescriptions or getting something to another primary care provider. Some of our needs right now, is we are working to try to figure out how to get TechCare access to improve conditions of care. It appears given as if there may have been a snag in that we're trying to work that out, to figure out how we can get read only, TechCare access to ensure that we have a continuous care model. We are also working on consolidating the referral process in HIPAA compliant fashion. We are working on emails where these referrals directly. Again, it will be HIPAA compliant because it will be through a secure email. We are also working on establishing a formal clinic space. Initially we were going to be stationed out of, Beth Haven but it seems like that might not be possible right now. We are working with a few local organizations as well as looking into what else we have available to establish a formal clinic space, where we can really set this up. I think right now, the ambulance and our Friday clinic will be working out quite well. That is all I had. Are there any questions or comments?

**Judge Clark:**

Thank you for that presentation, Ms. Venkat. Does anyone have any questions or comments? I think this is really exciting.

**Ms. Hallam:**

I do, Judge Clark. First of all, this is probably the best presentation I have seen since I have been on this board. I am just really excited about this. I have a couple questions. The first one is, how does this program overlap with or integrate into the Center for Inclusion Health's Homeless and Urban Poverty Medicine Program?

**Ms. Venkat:**

That is a really good question, we actually work extremely closely with them. I do not know if you guys know Dan Helka. He has an ambulance that they work with on ESG, so that is actually the ambulance we use. I also work with the Prevention Point Buprenorphine van and so I am really used to kind of making those referrals to ESG. The nice thing about being in inclusion health is we have access so many resources and so many awesome people in programs. Honestly, whenever we have any issues, I call Dan and I call their teams literally all the time. What I am trying to say is whenever we need them, we reach out to them and they reach out to us. They actually call us all the time with patients recently incarcerated trying to help us navigate the system and it works both ways. We are super integrated with them and I talked to Dan literally every day.

**Ms. Hallam:**

I am glad to hear that. My next question, is this regionally exclusive? Is it for only city folks, or only folks in Allegheny County, or is it literally just anyone released from the ACJ?

**Ms. Venkat:**

Anyone released from ACJ. One thing that we have to work out a little bit is our clinic will be located within Pittsburgh and obviously transportation is always a difficult thing. Initially, when we were looking at Beth Haven, the reason we chose that, I am not from Pittsburgh, so if I am miss stating this let me know, but I think a lot of the bus lines actually comes through downtown. We were thinking that might be a really good spot to position ourselves in a place where there was access to a lot of bus lines. Whenever patients come out of ACJ they are more than welcome to come to our clinic through the referral process but my only concern is if a patient has to travel really far, we don't want to be a burden on someone who is already trying to face a lot. What we are trying to do is partner with SQA's. There is a meeting coming up, I think next week are in 2 weeks, to ensure that in all the different neighborhoods we have access to a primary care physician. Then we can tell them that it might be easy to come to us, but we can give a warm hand off, with their consent obviously, to this primary care physician that you can see out there. We are really trying to get

this build into Pittsburgh that we are not burdening our patients too much and making their lives any more difficult than they have to be.

**Ms. Hallam:**

That is great. Also, if I can suggest reaching out to the Port Authority. They may be able to provide free bus passes for your clinic for the program. So maybe just put that on your radar as well.

**Ms. Venkat:**

That is awesome. Thank you.

**Ms. Hallam:**

My last question is, I saw in a lot of your slides the reference to medication assisted treatment, medications for opioid use disorder, which I am so excited to hear. Are there any suggestions that come from your program about making sure that folks in Allegheny County jail also have access to MAT? Folks coming off the street with MAT prescriptions.

**Ms. Venkat:**

Yes, we work closely with Dr. Anderson and we have been in touch a lot about how things are going there. I think the awesome thing is that it seems like it is starting, which is amazing. I mean that sounds like a feat in itself. There are some discussions on things like SUBLOCADE, which I think is a really good medication, but you know all these things cost money. I think that is the hardest thing that anyone faces when they do things like medication assisted treatment. How do you get medication coverage? I can tell you; I work in an outpatient MAT program and we even have a really difficult time getting access to things like SUBLOCADE. I think increasing access to things like SUBLOCADE and working with insurance companies will improve, hopefully in the next year, when people realize SUBLOCADE is a really good thing. I think insurance companies and pharmacies will help with that. I think part of it is getting access things like SUBLOCADE, where it is a onetime injection and how to I figure out innovative ways to get people SUBOXONE. The problem with SUBOXINE and BUPRENORPHINE is that it is a multiple dose a today medication. It is really difficult to make it once a day, especially for patients who are coming in needing it for things like an opioid use disorder related charge. They are definitely taking it at least twice a day. I know they are working on a lot of different ways to try and make that better though. It seems like Dr. Anderson is really taking by the reins and doing really great job.

**Ms. Hallam:**

Awesome and thank you for that. I would love for you to come and give us regular reports. We meet once a month, first Thursday of every month. I would love to hear the progress of this. This is just really exciting. Thank you so much for coming today.

**Judge Clark:**

Judge Lazzara, did you have a question or comment?

**Judge Lazzara:**

Yes, you said eventually you will have mental health professionals there and I do mental health court for Allegheny County, so I am very interested in that side of things. I was just wondering when that part of the program would be starting?

**Ms. Venkat:**

We are working on that. Because I work with Inclusion Health, we are really lucky because I have a Psychiatrist who works in a lot of our programs right now. The goal would be to have that Psychiatrist come to our clinic maybe once or twice a month and have almost like a behavioral health clinic. You know what I mean? Where people could come in and see this person. She is a Psychiatrist and obviously she has a lot of other clinical time. What we are working on is getting a grant to get a Behavioral Health Consultant, which is like a new model integrating behavioral health into primary care. Behavioral Health Consultants are typically licensed Social Workers, who do the initial behavioral

health, especially the counseling aspect of it and work collaboratively with our Psychiatrist. So right now, we are trying to seek grant money to hire that person, but we have not come upon any yet, but we are working on it. The goal would be to do that as soon as possible. The one thing that I feel we are really lucky in working with the Center for Inclusion Health is while we may not have a behavioral health person in the next month, we have a lot of ways to refer out. We work with Four Allegheny Center and a lot of the people within our network. Again, we have a Psychiatrist who works with a lot of our inclusion health patients and people who are really having social determinants of health issues and they are pretty familiar with what we deal with, which is good. I think it really helps the patients get better. I am hoping within the next 6 months I can give a “Yes we are doing it” but I have to wait for funding, unfortunately, which is how the work works, I guess.

**Judge Lazzara:**

I am well aware of that. That is always the problem. I was really hoping to have something quick, as you know, when people get out of jail they may get an appointment at one of our health care providers but may not be able to see their Psychiatrist for 3-6 months. They may not be able to get in with a therapist for many months. I was looking for something as quick as possible for the folks that are coming out.

**Ms. Venkat:**

Dr. Robertson and I are actually Primary Care Providers, so if someone needs a bridge prescription, maybe they are being released and there is an issue with their prescription, we can at least get them a prescription. I would not say I am experience enough to be like “I am going to change someone’s Lithium dose to this”. You know what I mean? But if someone needs an urgent thing, we are able to at least prescribe that. We are able to prescribe bridge prescriptions of almost anything. It is just a matter of, I do not know if I can constantly be like, “I am going to increase someone’s lithium” or “change them from Lithium to Depakote”, or something. Do you know what I mean? But at least in the beginning we can do that.

**Judge Lazzara:**

Thank you. It is really nice to know that there is that resource.

**Deputy Warden Williams:**

If I could just interject, part of the benefit of the partnership and collaboration is because we have AHN employees here and they will be served in the community by AHN employees we can have continuous communication back and forth. If it is something like lithium, we can provide all of the previous lab results so that they can see what the baseline levels have been. Then they can try and make the best-informed decisions and care as they are getting scheduled with the appropriate follow up individual. As Divya had mentioned before, we are working on that collaboration to make sure that we our HIPAA compliant in sharing of information within the patient population and access to our health care record, which is pretty comprehensive while somebody’s with us.

**Ms. Moss:**

That is exciting. That is very nice.

**Judge Clark:**

Thank you. Does anyone else have any questions or comments? Thank you so much for it. This was a very wonderful presentation and we have a lot to look forward to. Will be interested in an update in the not too distant future. Thank you.

**Ms. Venkat:**

If you would like my contact information, I can put it in the chat or something. Would that be helpful?

**Judge Clark:**

I think we can also get it from Deputy Warden Williams, but you can put it in the chat. That would be helpful. Thank

you. Alright we are going to move on to our agenda.

### 3. Old Business

#### A. Incarcerated Individual's Welfare Fund Sub-Committee Report

**Judge Clark:**

We are going to start with old business and first up is Judge Lazzara with the Incarcerated Individual's Welfare budget committee report. It is a long name.

**Judge Lazzara:**

It is a very long name, but it is a very committed and passionate group. We have been doing, I think, some of some good work. As everyone knows, we've been looking at it at different uses for the Incarcerated Individual's Welfare Fund and one of the things we have really been discussing a lot since probably late March, early April, is discussing options to engage some support for the board. So that we are able to better perform our oversight functions. This is a small board. There is not a lot of people on it. I think it is only nine people total. The people that are on it all have generally other jobs that require an awful lot of time and dedication because you know we have the Controller, the Sheriff, two Judges, and somebody from Council who does a lot. Even our folks with the community, Terri Klein is so busy with her physical therapy practice. There is an awful lot of things that we do that take away from our ability to dedicate as much time as we would like to for the work of this board. We think the work of this board is very important and we think that there are an awful lot of things that could be even better at the Allegheny County Jail, that could be improved. We simply do not feel that we necessarily have the time to do it as much as we would like to. So one of the things that we came up with was the idea of hiring an individual or engaging an individual, we're not sure how this would work and we're hoping to communicate better with the county about how this might work. So, to bring someone on who would be a liaison between the board and the Allegheny County Jail. Someone who would be able to serve as a proxy for us in the performance of our duties. Someone who can go and look at the policies and procedures and also look at the records too tell us whether or not those policies procedures are being followed. Somebody who could, when there is a complaint made to the board can go into the jail. For example, if there has been a complaint that there's no heat on 3E, they could go into the jail and they could see there is heat on 3E, so these stories that are coming out of the jail may not necessarily be reflecting the true conditions in the jail. They be able to work both ways to be able to check on conditions that are existing in the jail, check policies and procedures, to even be a conduit between the board and groups that want to have more time talking to the board. Ones who do not think that sending an email for public comment is necessarily enough to get their point across. Perhaps having a longer-term discussion with the transgender community, which we are going to talk about a little bit later as we did have one of those. To be able to have more consistent conversations with community groups that are interested in the work that this board does and the work that occurs in the Allegheny County Jail. After having this discussion at multiple subcommittee meetings, we think that we are now ready to present a motion to the overall board on this topic. I sent the motion to Judge Clark and I know that she submitted it to, I think, the board in the notes. I am just going to read what it is that we need to submit it to her if that is okay.

**Judge Clark:**

Judge Lazzara, I did not see that one. I had so many things, I think I missed that one. So, I did not extend that to the board. I think Ms. Klein asked me that before we started in the meeting. You may have sent it, but I had so many emails that I might have gotten it confused with another thing that you sent me and did not open it.

**Judge Lazzara:**

That is ok. I will just read the whole thing so that everyone can see what it is that we sent.

**ALLEGHENY COUNTY JAIL OVERSIGHT BOARD  
INCARCERATED INDIVIDUALS WELFARE FUND SUBCOMMITTEE  
MOTION**

*The Jail Oversight Board (JOB) is a statutorily created Board empowered to provide oversight of the Allegheny County Jail and ensure the health and welfare of its population. The Board is limited in number (9), and the majority, if not all, of its statutorily mandated members serve on the Board in addition to their own demanding and time-consuming professions. The work of the Board is substantial and needs to be accomplished in a timely fashion.*

*In an effort to deal with the business of the Board in a more timely and thorough manner, the IIWF Subcommittee is making the following motion:*

*The Board should retain an individual for the position of JOB Liaison. It is anticipated that the position would be full-time and would be funded by the IIWF. The overall function of the Liaison would be to serve as a proxy to perform the JOB's statutory duties. More specifically, the Liaison would inspect on the Board's behalf and report back to the Board facts and findings for the Board's consideration and action. Items within the purview of the Liaison's inspection function would include, but not be limited to: all ACJ policies, practices, rules, regulations, procedures, records, forms, schedules, and contracts; actual physical site conditions; any issues raised and submitted to the Board through public comments or other correspondence. The Liaison would also be a conduit for communication between the Board and interested and concerned stakeholders such as members of the public, advisory boards and community organizations, as well as experts and other similarly situated facilities. The Liaison would have no power to take action based on said inspections and communications. The results of all inspections and communications would be reported to the Board, which would have the sole power to act.*

*The IIWF Subcommittee is willing and able to provide a more fully formed job description for the position, make recommendations as to salary, benefits and employment status (employee, independent contractor, etc.), and participate in the review of candidates and selection of an individual to fill the position.*

*The IIWF Subcommittee believes that a JOB Liaison would be a benefit to the JOB, ACJ and all alternative housing facilities, incarcerated individuals and the citizens of Allegheny County by providing timely, accurate and relevant information to the Board from which informed decisions and actions could be taken in a timely manner.*

We understand that there is going to be much more discussion of this beyond just our motion, but that is the motion, we retained such person and we work with the county on how that is accomplished.

**Judge Clark:**

She made a motion. Is there a second?

**Ms. Hallam:**

I will second it.

**Judge Clark:**

Alright, I would like the committee to just to break it down, so it is clear before we take a vote. So, it is clear what everyone is specifically voting on. Then if anyone has any questions or any other discussion before we take a vote, we can entertain it now. I mean obviously for the liaison and the purposes set forth. So, I guess the question is,

are you recommending that the money to pay for that liaison come from the Incarcerated Individual's Welfare Fund?

**Judge Lazzara:**

That is correct.

**Judge Clark:**

Then the second part is, you will work with the County to determine the hiring process and how you can make this happen?

**Judge Lazzara:**

Correct. We do not expect that once we make this motion, we are going to be able to hire somebody tomorrow. We understand that we will need to work closely with the county as to how any such hiring would take place. You know, where that person he would fit, who that person would report to, and all of those things. We do have some draft job descriptions in the like that we would be able to work with the county with. We would at least like to be able to have permission to move forward and to start to more fully develop and eventually hopefully higher liaison. We think it would be really helpful to the Board to have somebody who can be our eyes, our hands, and our ears. Then they can come back and really report so that we have very complete information when we make decisions.

**Ms. Moss:**

Wouldn't we have to vote on whether we want it? Or did we vote already? I do not really remember us voting yet if we did want that.

**Judge Clark:**

We had a motion and a second. I was just asking them to clarify the specifics so that everyone could understand.

**Ms. Moss:**

Well this is specific. I am just trying to understand. Did we ever vote this is what we wanted, to hire someone or get someone or work on this?

**Judge Clark:**

That is what the motion is, to hire someone. We have not voted on it yet. I am just asking for the specifics of the board knows exactly what the process will be and where the money is going to come from. That was my questions. But if you have some questions this is the time to ask them.

**Ms. Moss:**

That is what I am asking, I understood the committee was working on something to make the job easier and to be able to have more access to what's going on, so we can do things quicker. I understand that. But I do not ever remember voting on and saying that is what we wanted to do.

**Judge Lazzara:**

That is what we are doing today. We are asking for permission to be able to continue with this process.

**Ms. Moss:**

I just wanted to be clear.

**Judge Lazzara:**

We are not hiring somebody today. We are asking for permission to continue to work with the county so that we can get somebody hired that is paid for out of the IIWF.

**Judge Clark:**

Any other questions or comments?

Then I will call for vote. There has been a motion by Judge Lazzara and a second by Ms. Hallam.

All those in favor?

**Others:**

Aye

**Judge Clark:**

Any oppose?

Any abstentions?

**Ms. Moss:**

I am going to abstain.

**Judge Clark:**

We have one abstention.

The motion is carried and then we will get an update at subsequent meetings as to where we are. Thank you. You guys have done a lot of work. Judge Lazzara, if you could forward a copy of that motion to Ms. Carroll because I did not send it to her because I did not see it so she can have it for the minutes.

***The board approved a motion (6 Yea, 1 Abstained, 1 Absent) by Judge Lazzara, duly seconded by Ms. Hallam, to continue to work with the County to work towards hiring a JOB Liaison to be paid for out of the Incarcerated Individual's Welfare Fund.***

**Judge Lazzara:**

Absolutely.

**Judge Clark:**

Thank you.

**B. Suicide Prevention Sub-Committee Report**

**Judge Clark:**

The next thing is Warden Harper with suicide prevention update.

**Warden Harper:**

Good afternoon everybody. The NCCHC recommended that all the cells in the cell blocks were painted to dark. I am proud to announce that all cells in 25 of the 35 cell blocks have been painted white.

**Judge Clark:**

Thank you. Any questions about that?

**C. GTL Update**

**Judge Clark:**

We are going to now have a GTL update. As you recall at the last meeting, we had a request for GTL to be at the next meeting to tell us about the process by which we can get the money the board voted to be on the incarcerated individual accounts, to return that. I am going to ask the Warden to give you an update about that.

**Warden Harper:**

I did have a conversation with GTL and GTL recommended that they would be present to talk to the board but only in an executive session. I did report that to Judge Clark and Judge Clark made a decision. You want to tell them your decision?

**Judge Clark:**

Yes, I told the Warden I was not happy with that because I did not feel this was an issue that should be discussed in an executive session. It was something that I believe should be presented at the public meeting. I said we are not going to have them in the executive session because it is not one of those matters. The Warden said that he would convey that to them I do not know whether he is had a chance to speak with them since the Warden and I met to discuss this on Tuesday. To say the least, I was not happy with their response because I felt that they should come here and explain. I do not think it is that complicated. Of course, I am not a technology person so let me preface my remarks with that. I am not a technology person but it's clear that for many meetings since the pandemic this board has voted to give each incarcerated individual a total of \$100: \$50 to be put on the tablet accounts and \$50 to be put on the phone accounts. Some of the folks are not in the jail long enough to use it, and that is a blessing. The board also voted that the money should be given to them or at the very least, it should be returned to the Incarcerated Individual's Welfare Fund. It does not belong to GTL. I feel like they are keeping money that does not belong to them and there has to be a process. I do not understand the complications. Maybe it is not that complicated and maybe there is something they have to do and that is fine. I just do not think this is something that needs to be discussed in an executive session. That was just my thoughts.

Ms. Hallam?

**Ms. Hallam:**

Yes, I just have a question. If GTL is the one who is refusing to speak in the public meeting, there is a provision in the GTL contract that with 90 days' notice we can terminate the contract at will, for any reason. I would like that to be something that is in the back of our minds that we consider, if they are not willing to come and speak publicly that we consider ending our relationship with them.

**Judge Clark:**

I understand that but I am not a person who likes to operate under threat so I would not recommend that. It takes a long time to get these contracts and we have the tablets. I think what will happen is the persons who will be punished for this will be incarcerated individual. So that is not something I would recommend. I do not even think that we should say that. I do not want them to think that were threatening them. I just had this conversation on Tuesday with Warden Harper, so maybe the Warden and I can talk to them and prevail on them that were nice people. We are not going to hurt them; we just want some information and to ask them if there anything the board could do to help them make this happen. So, I would not recommend that. Let me just say this is a public meeting and it was said on the record and it will be reflected in the minutes. I do not want them to think that we are saying you have to come going to do this because I do not think that is the case. I do not think that is the stance we want to take right now. There may be a good reason that they do not I feel like they should come to a public meeting. I cannot think of one, but I have been known to be wrong before, so I am just going to keep an open mind until we have some discussion about that. Right now, I can tell you and Warden can tell you, I was not happy with that decision. We have the items for an executive session today. Our meetings are long, and everybody is busy. I said if that is the only way they want to speak then they do not need to bother come today. You all can say you are fine with an executive session and if you have somebody wants to make a motion that we allow that

to happen, I would certainly entertain that. I also believe in the majority gets to pick the decision, but I cannot think of a reason as to why it needs to be, sort of, behind closed doors. I guess that is the update for GTL because they are not here. But I did ask the Warden to present that to you.

**D. Update on Discussion with Vendor for using Polycom Devices for Meeting with Other Providers (CRR, Inpatient Programs, etc.)**

**Judge Clark:**

Next thing is update on discussion with the vendor for using Polycom devices for meetings with other providers (CRR, Inpatient Programs, etc.). Warden, do you have an update on that?

**Warden Harper:**

Yes, I just want to report to the board that we did purchase 10 Polycom licenses. What that means is that now we are able to schedule appointments with jail residents and other entities within the community, where they can meet with their clients on the pod. We are in the process of updating our policy and once we update the policy, hopefully by the next Jail Oversight Board meeting, I will be able to report that we are scheduling these meetings.

**Judge Lazzara:**

Thank you so much Warden Harper. I appreciate that. It is really important that these providers have access to people so we can get them out of the jail. So, thank you. Sorry to jump in.

**Judge Clark:**

That is ok. Ms. Hallam?

**Ms. Hallam:**

Yes, I just have a couple of questions about that. I have gotten reports from several incarcerated individuals and even officers at the jail that reported that attorneys from organizations like ACLU, PAPILP, and ALC have been taken off the approved attorneys call list, just at a moment when more access being made to these devices to have conversations with attorneys. Can you speak to whether or not any attorneys have been removed for the approved attorney call list?

**Warden Harper:**

I do not know anything about that Ms. Hallam, but I will look into that.

**Ms. Hallam:**

Thank you. Then the second question, I have also received reports that folks who are in the men's restricted housing, segregated housing unit, have been prevented from using these devices at all to call their attorneys. Do you have a number of about how many people currently have their communications privileges suspended and why?

**Warden Harper:**

First, I would like to say that we never suspend communication with anyone's attorney. They always have access to their attorney. As far as a privilege of a telephone call, these privileges could be suspended but we never suspend access to an attorney.

**Ms. Hallam:**

Okay, so that for any reason? Whether they are in segregated or restricted housing? Whether they are on quarantine or isolation for COVID? There is no time, ever, that anyone would not be able to speak with their attorney?

**Warden Harper:**

The only way that they would not be able to speak with their attorney is if they are on suicide watch, suicidal, threatening harm to themselves. Of course, we would not send them out to speak with their attorney. But other than that, everyone will have access. No one should be not allowed to speak to their attorney at all unless they are self-harming themselves.

**Deputy Warden Williams:**

Ms. Hallam, early in the pandemic, I think it is important to note that before we had the technological infrastructure, individuals who were on medical isolation status and positive for COVID-19, we were communicating with their legal entities to assist them, but we were not able at that time to provide equal access to their legal representation. That was very early on until we were able to accommodate some of these different changes but still try to provide appropriate access through staff.

**Ms. Hallam:**

Just a follow up, you did say anyone at risk for self-harm is not able to have those communications. Do you have a number on how many people currently that is?

**Warden Harper:**

I do not Ms. Hallam.

**Deputy Warden Williams:**

If you give me one minute, I can tell you those that are on close observation status.

**Ms. Hallam:**

Thank you very much.

**Judge Lazzara:**

Ms. Hallam, I can tell you that sometimes phone services are eliminated/taken away from people because of their behavior, such as violating no contact orders with victims on cases in the like and I believe usually there's a judicial order that comes down that asks the jail to suspend those communications. That unfortunately has been occurring an awful lot lately.

**Ms. Hallam:**

This was specifically for attorney conversations is what I was most concerned about.

**Judge Lazzara:**

Can I ask a question while we are talking about communications if you do not mind?

**Judge Clark:**

Yes

**Judge Lazzara:**

My understanding is that the old phone system did not allow people to make third party calls. They could not, you know, call their mother and their mother could patch in the victim on the case. My understanding is that is now occurring with the new system. That third-party calls are happening. I know that the courts are getting third-party calls, so somebody calls their significant other and their significant other patches in the court and starts calling Judge's chambers in the like. My understanding from the District Attorney's Office is that that is also occurring with victims. These are not straight calls from the jail to the victim but calls to a third party, who then calls the victim, that says you do not show up for court or this is going to happen. I just did not know if the jail was aware

that third party calls are occurring and if that was understood that this was going to be allowed under the new communications contract. Being the Domestic Violence Court Judge, I have an awful lot of concerns about third party calls occurring.

**Warden Harper:**

I would like to talk about that during executive session. I really am uncomfortable talking about it in the public setting right now. If you are willing, could I talk about that during the executive session?

**Judge Clark:**

Sure, we can do that first.

**Warden Harper:**

Thank you.

**Judge Clark:**

Deputy Warden Williams, did you have that number for Ms. Hallam?

**Deputy Warden Williams:**

Yes ma'am. Two individuals presently in our population are on close observation status and are 3AM count was 1,762.

**Ms. Hallam:**

Thank you very much.

**E. Discussion with the Solicitor's Office to Attend the Next Meeting to Discuss what Actions the Board Can Take for Employees who Refuse the COVID Vaccine**

**Judge Clark:**

The next thing is at the last meeting we wanted someone from the solicitor's office to attend the meeting. Ms. Hallam had some questions about were there any actions the board can take for employees who refuse the COVID vaccine, reassignment of duties or anything. Mr. Bacharach, I know that you are not the solicitor that usually handles the contract, so I don't know whether you have spoken with that person or whether you can address that for us.

**Mr. Bacharach:**

I can, your Honor, briefly. What I can say that this issue has been discussed with the Warden, staff officers there, and with the solicitor's office. We believe, the solicitor's office believes, that it is being handled appropriately under the present circumstances in terms of vaccinations of employees. We do not feel that it is appropriate for us to give a legal opinion on matters like this, in a public session in particular, but our obligation is to provide legal advice to the jail. So that is it. We are also conscious that the situation it has changed, obviously, with vaccinations being available and the numbers of cases being down, both in the county and in the jail.

**Judge Clark:**

Ms. Hallam?

**Ms. Hallam:**

Yes, I have a couple questions about that. I guess the first thing is you said it is being handled and you are satisfied by the way it is being handled with the staff vaccination and refusal to vaccinate. Can you go into detail on how it is being handled?

**Mr. Bacharach:**

Nothing other than to say that the law department discussed it with the jail.

**Ms. Hallam:**

Is there another solicitor, law department who can give us an opinion on this? I have read the collective bargaining agreement and it grants the county the right to reassign an employees work shift or position based on a good and sufficient reason which, I assume, would include stopping a deadly pandemic and protecting unvaccinated, medically vulnerable incarcerated people.

**Mr. Bacharach:**

We cannot offer legal opinions on matters like this in a public session. Our obligation is to provide that advice to the Warden and the people at the jail.

**Ms. Hallam:**

If you are going to stick around for Executive Session, I would appreciate us discussing that then.

**Mr. Bacharach:**

I will, if you want but I am not going to be able to say any more than that. It is still an issue of confidentiality between the law department and the jail.

**Ms. Hallam:**

As a board, we do not have our own solicitor. Are you saying that we as the Jail Oversight Board, we are not a client of the county or of your law department?

**Mr. Bacharach:**

The Jail Oversight Board is not, in our view, an entity we can give legal advice to on a matter like this.

**Ms. Hallam:**

Can you point us to who within the county law department can give the Jail Oversight Board advice? Because this is the Allegheny County Jail Oversight Board.

**Mr. Bacharach:**

I understand that. No, I cannot.

**Ms. Hallam:**

Ok thank you.

**Warden Harper:**

Can I talk a little bit on this subject please, your Honor?

**Judge Clark:**

Certainly, Warden.

**Warden Harper:**

First of all, I wanted to thank all of the employees at the Allegheny County Jail for the outstanding job that they have done to mitigate this virus. We have had no deaths and we have had no serious COVID-related medical issues. So, first of all with the thank everybody. But most importantly I want to say this to the board and to the public, 23% of our inmates have been vaccinated and 48% of our employees have been vaccinated. We test every individual coming into our facility for COVID. What I am saying is, we have no cases of COVID within our facility right now and as you can see within the community the COVID cases have gone down. I just want to tell everybody

that we have done a remarkable job during this pandemic. For this question to come up, I am really interested into why is coming up, because we have done such a great job and we are almost at the end of this pandemic.

**Judge Clark:**

I would just say this. I echo the Warden's sentiments and want to thank the staff at the jail. I think though the concern was the jail staff works closely with the incarcerated individuals and that many of the incarcerated individuals have not yet been vaccinated. So, if the staff is able to contract the virus and pass it on, we could possibly have an outbreak in the jail. That being the case, I think this issue is something that all sort of employers, especially in the public sector government sector, are wrestling with. I think things are a lot easier in the private sector, to say you must be vaccinated or else you have to work in this particular job. We are struggling in the court. There are differing opinions. I believe we do not have the right to demand that persons be vaccinated and therefore they cannot lose their job. We just have to assess on a case by case basis. Obviously, if someone is showing symptoms then there going to be sent home. We will do all the things that we did during the height of the pandemic to try to keep people safe as possible. Most people are operating under an honor system, wear your mask if you are not vaccinated and remove your mask if you are vaccinated. The court, right now, is in the public spaces requiring everybody to mask. At some point, probably on I think it is June 28<sup>th</sup>, the governor is going to lift all restrictions. Once that occurs, I think there we are and that is the end of the inquiry, unless there is another outbreak or a reason. I could be wrong, but I think that is sort of the dilemma. As to the issue is to represent the board, I cannot answer that Ms. Hallam. My question is, even with the authority of the board, is to regulate the assignments of those working at the jail. I do not think we have that authority. I think that rests with the Warden until we have someone to advise us otherwise. You are on County Council and they may have different powers than this board does. Maybe the answers to your questions lie within County Council and not with the oversight board. But I could be wrong. Yes, Ms. Hallam?

**Ms. Hallam:**

Yes, a couple of things. The first thing, I totally appreciate your response but, I mean, the statute says that we as a board have responsibilities protecting the health and wellbeing. So, I just wanted to point that out. The other thing, in regard to other places that are beginning to enroll in honor system, in most places people option whether or not they want to go there. For example, your place of employment. If your place of employment is telling people that they do not need to get vaccinated, you can quit your job.

**Judge Clark:**

I understand and I think that is a big difference. I think that is also one of the differences with the court. We order to come there. They are not coming to see Judge Lazzara just because they want to say hi to her, maybe some of the people that have graduated from mental health court probably do come back and say they want to see her. But, you know, it is, they are court ordered to be there. So, there is a difference, I acknowledge that.

**Ms. Hallam:**

My last question is about jail staff members not being compensated more than once if they are exposed to COVID-19 and are forced to quarantine. We talked about this before I'm just concerned wondering if that policy is changed at all because I am worried that, maybe corrections officer specifically, who are in the close long-term contact with other folks in the jail, will be deterred from reporting that they are sick and getting treatment if they are fearing that they will not get paid while they are quarantining. I mean, we can all hope that the pandemic is almost over or nearing end, but the reality is it is not over yet. So, we cannot let our guard down now because it can be very dangerous. Has that policy change where jail staff members who are exposed to COVID at work are able to get paid for forced quarantine more than once?

**Warden Harper:**

The policy has not changed.

**Ms. Hallam:**

Is there any concern about being a deterrent from folks reporting when they are feeling ill or needing to get treatment?

**Warden Harper:**

Ma'am, I can go by what the policy is, I cannot go by what my concerns are, so the policy has not changed.

**Ms. Hallam:**

Okay, can you maybe justify why that policy is the way it is?

**Warden Harper:**

I cannot at this time, Ma'am.

**Ms. Hallam:**

Why can you not?

**Warden Harper:**

I will have to do a little bit more research and get back to you. At this time, I cannot.

**Ms. Hallam:**

We can have the conversation at the next meeting. I would appreciate that. Thank you very much.

**F. List of Other Jails/Prisons that Warden Harper Spoke to Regarding What Steps They are Taking if Their Employees Refuse the COVID Vaccine**

**Judge Clark:**

The next thing is Warden Harper was to see if you could provide a list of the institutions that he contacted regarding what steps they are taking with employees have refused the vaccine. Warden, can you tell us who you contacted?

**Warden Harper:**

I contacted Washington County and Westmoreland County.

**G. Detail of "Visitations" from Monthly Warden's Report**

**Judge Clark:**

Then, I am not sure what this means on the agenda, detail of visitations from the monthly Warden's report, which was on page 24 of the draft of the minutes.

**Warden Harper:**

Ms. Klein did find an issue with the visitation at the last meeting and it was a mistake. We did not have any visitation, only attorney visitation. So, Ms. Klein, that was a mistake.

**Ms. Hallam:**

Can I ask, Judge Clark, is there any plan for return to visitation at the jail? Is that coming up anytime in the near future that you know of?

**Judge Clark:**

You can ask the Warden that. I am assuming that there will be once we are through the pandemic. Warden, have there been discussions, is there a plan to resume visitations in the jail? If so, do you have any idea when?

**Warden Harper:**

We do not have a plan as of yet. We will try to start looking at that but right now, we do not have a plan.

**H. Update on Exit Interviews from Incarcerated Individuals**

**Judge Clark:**

The last item under old business is an update on the exit interviews for incarcerated individuals. This is from the exit interview survey being done from those being released from the jail and I know there have been some subsequent meetings with Ms. Dalton and some members of the Prison Society. They are working on the things that need to be put into place, so I guess I cannot really give you a report on that today.

**4. Public Comments**

**Judge Clark:**

At this time, we are going to move to public comment. We had, I think, 25 individual comments. I am going to try to go through them quickly in the interest of time.

**A. Chloe Linn**

*"1. Why does the County and this board continue to allow the Warden to operate the jail as if it were a PARAMILITARY ORGANIZATION? "A paramilitary organization is a semi-militarized force whose organizational structure, tactics, training, subculture, and (often) function are similar to those of a professional military, but is not formally part of a country's armed forces". I would think with all the calls for jail reform that this type of mentality would be frowned upon and disallowed? 2. Once these meetings return to an in-person format, will they continue to be shown virtually for taxpayers that cannot attend and will we still be able to submit questions? Thank you!"*

**Judge Clark:**

I would have to say, I strongly disagree with that assessment of how the jail operates, but I do not know if the Warden wants to comment on it. I do not think you have to if you do not want to, Warden.

**Warden Harper:**

I have no comment, your Honor. I agree with what you said.

**Judge Clark:**

When we return to live, in person meetings, then the questions will be submitted in the traditional format, people will address the board publicly. We cannot get through these questions as it is and so if we have people live and written question, we would never be able to get through them. I had not thought about whether we could continue to have a live showing of the meeting for the public. We have been able to do that because Mr. Sykes from our court has been gracious enough to work beyond his normal court schedule to do these live meetings. So, I cannot answer that. It is something that maybe the board can discuss whether we want to continue to have some kind of live stream or live broadcast of the oversight meeting. I do not have any particular position on that now. I think we can think about that. Ms. Hallam?

**Ms. Hallam:**

Yes, I just wanted to say that I would just have the concern that one of the few benefits that I think has come out of over a year of this pandemic is that a lot of these government meetings have become more accessible to people who normally would not have been able to make it downtown to see the meetings in person. Whether its folks with disabilities, folks who are unable to obtain childcare or transportation, or folks who are maybe working at the time and could listen on their phone because we are virtual but would not be able to make it downtown. I

would like us to maybe consider making sure that the meetings are live streamed in the future. If that requires a motion, maybe at the next Jail Oversight Board meeting, I would be interested in that.

**Judge Clark:**

We can think about it. I mean we need to think how we want to do it and who we want to do it. Like I said, Mr. Sykes has done a yeomen's job, but you know he has a full-time job for the court. I do not believe we are paying him to do this. We are very grateful. I am not opposed to that. I do agree, this is a public meeting and a lot of lessons we learned from the pandemic is greater access that people have to everything by having things in a virtual world. I think it is open for discussion and we can figure out how we want to do it. I am certainly not opposed to it.

**Ms. Hallam:**

Thank you. Even recording and uploading them, like a film of the meeting, like other governmental agencies do would be awesome addition as well. I would be willing to reach out to County Council because we have a video crew who does that for all of our meetings and see if maybe they could lend them to us for once a month for these.

**Judge Clark:**

If you want to ask, thank you.

**B. Robert Cosgrove**

*"At the May JOB meeting the Warden said that the recent increase in commissary costs was out of his hands and that prices had only gone up by 3% anyway. (This is to the best of my recollection as May meeting minutes are not posted). In response to a question about commissary costs in May's Public Comments the Warden said only that "The new commissary vendor, Summit's rise in some commissary prices are in accordance to the contract." However, the contract's price escalation clause does not apply to commissary items; it only says that Summit cannot increase the cost-per-meal it charges the County by more than 3% year over year. It does nothing to limit price increases for incarcerated people. So how are commissary prices set? Who sets them?"*

**Judge Clark:**

We have not approved May meeting minutes yet, which is why they are not posted.

I think maybe what I would like to do because I know that Mr. Korinski did some comparison of the commissary prices, is if we could have a presentation on that at the next meeting. That way we have actual information and are not just trying to guess at it. Would that be appropriate? Mr. Korinski is giving his thumbs up. Warden, would that be okay to leave this to the next meeting.

**Warden Harper:**

Whatever you say, your Honor. Yes, Ma'am.

**Judge Clark:**

Alright, I think that we will leave that, so that can have some actual information and I can send out the information that Mr. Korinski gathered to the Board Members.

**C. Colleen Bradley**

*"I'm looking for clarification on who operates the Jail Commissary. If I recall correctly Warden Harper said at the May meeting that it's run by the same vendor that provides the rest of the Jail's food service, but I don't see anything in the contract with Summit that mentions it. Maybe Commissary is a colloquial term for the "Behavior Modification Program" referenced in the contract? Or perhaps the terms of the Commissary are covered in another contract altogether? Hope you can explain or point me in the right direction, thanks."*

**Judge Clark:**

Warden, can you clarify, is that commissary run by the same vendor that provides the rest of the jail's food service?

**Warden Harper:**

Summit runs our commissary and summit also runs our food services at the Allegheny County Jail.

**Ms. Hallam:**

Judge Clark, can I just ask something really quickly while we are talking about commissary. I have gotten a lot of reports from family members of folks who were incarcerated who were unaware of the company switch to Summit and now there is a new place that they go to order the Access Securepaks. Is there some way, like some sort of paper notice could go out to everyone at the jail to let their families know the new location for ordering those packages?

**Warden Harper:**

I thought that was already done but we can definitely do that.

**D. Andrea K Silver**

*"The Jail's contract with Summit Food Service shows that there is a much higher standard for meals served to employees of the Jail than meals served to the incarcerated. For example, the contract stipulates that "Staff meals shall include a salad bar 7 days a week with the minimum following items: Greens (alternatives to iceberg lettuce frequently available), tomatoes, cucumbers, peppers, beets, carrots, celery, shredded cheese, onions, and olives); Two dressings and Oil & Vinegar; Tuna salad, chicken salad, pasta salad, cottage cheese, and/or additional fresh vegetables and fruits." There is certainly no such standard for meals served to the incarcerated. Why do Jail employees deserve better food than the people incarcerated there?"*

**Judge Clark:**

I know one of the issues is the number of meals that have to be prepared and I think the board has raised the issue many times as the quality of food both the general quality of how it tastes but also the nutritional value. Warden, I do not know whether there is anything that you want to say because I would take it that the incarcerated individuals do not get the salad bar.

**Warden Harper:**

I just want to say this, your Honor. As I stated before to the board, Summit has a dietician that comes up with the diet plan for individuals living in our facility that consist of 3200 calories. Now the board also asked about a year ago for us to provide green vegetables, fruit and salads for these individuals and if you look on our website you will see our menu with green vegetables, salad, fruit, etc. A dietician prepares a meal for Summit and the meals are presentable and good. We get photographs of these meals; we inspect these meals; and the meals look swell. As far as the employees, the employees do get a meal while they are on duty, we provide them a free meal also. We do not treat employees differently from inmates. We actually have a dietician that comes up with the meals for the inmates.

**Ms. Moss:**

Do employees eat the same meal the residents eat? Do the employees have the same menu?

**Warden Harper:**

They do not Ma'am. You have to realize, with the inmate population, we are feeding 1,700 individuals 3x a day. That is over 8,000 meals a day, as opposed to 300. It would be kind of hard to serve both entities the same meal when you have 8,000 meals being served.

**Ms. Moss:**

I understand that but if they are fixing meals for how many and they eat at the same time, is that correct? When employees eat their meals, they make them a separate meal? I am just trying to understand this.

**Warden Harper:**

Yes, two different meals.

**Deputy Warden Williams:**

Ms. Moss, our employees work across three shifts. Some individuals who work the overnight shift are eating their lunch break or meal break when individuals who live here or reside here are sleeping. So we do have meals that are at different times within the facility.

**Ms. Moss:**

But they are prepared by the same people.

**Deputy Warden Williams:**

We have different crews that provide meals because of the environment they are prepared in, different settings, to make sure that mealtimes can be throughout the facility at the appropriate times.

**Ms. Moss:**

But it is all done by Summit? That is what I am getting at.

**Warden Harper:**

Yes Ma'am.

**Ms. Hallam:**

If we are going to be back to in person meetings sometime soon, I would love to take up that offer of a sample meal for all the board members. I would love for us to eat what are incarcerated population that we are overseeing eats. If that can be arranged, I would really appreciate it.

**Warden Harper:**

You know, I will eat a meal with you Ms. Hallam because the food is edible. Yes, Ma'am we can do that.

**Judge Clark:**

I would also suggest that it could be at some time when we are making the inspections, depending on the time of the day that were there if it is at a time that we have meals. We have done that in the juvenile facilities, the juvenile court judges, we eat what they eat. But I have to say they eat pretty well but the populations are much smaller. They might be fixing meals for 100 kids or 40 kids or something like that. It is a little easier to manage but I think it is a good idea to eat it.

**E. Ron Broome**

*"Food quality at ACJ has come up a lot, so I think it would make sense to audit Summit Food Service for adherence to their contract with the Jail. According to the contract, "the County Manager, the County Controller or their designees" are able to request access to any of the "books, program and financial records, documents and other evidence pertaining to costs and expenses" of providing food service at ACJ. So can Controller Wagner seek out these records and/or initiate an audit? It would be great if the entire Board were able to examine them, can that be arranged?"*

**Judge Clark:**

I guess that is a question for Ms. Wagner if she is still on.

**Ms. Wagner:**

Sure, I am here. This was actually the subject of an audit within, just going by my memory here, within the last 12 months. Both of those audits were with Trinity as a food service provider at both the jail and Shuman. Those are both available on our website. We can certainly request specific information but based on the audit schedule, I do not believe, since we audit every department of the county, that completing an audit within a year of the same subject being done would make sense for our audit plan. We do not have the capacity to be able to just redo that right over again.

**Judge Clark:**

But there are regular audits conducted of all of the county department, is that correct Ms. Wagner?

**Ms. Wagner:**

Yes.

**Judge Clark:**

So, at the appropriate time, would this happen? In particular, the food service contract, would that be audited?

**Ms. Wagner:**

Well, that falls under what I would commonly refer to as the discretionary category of audits. You have a lot of audits that are statutory required. Often times those are different types of funds within different departments, such as the Health Department. So with this, it would be on the decision making of the Controller's Office, at any point in time, as to whether that audit would be conducted, much like when we audited the Corizon Health Care Provider, the former health care provider of the jail. That was also, for lack of a better term, falling under the category of discretionary audit, not one that is mandated by law.

**F. Amber Riazzi**

*"Can the Board start some process to audit the Jail's contract with its exterminator Complete Pest Solutions? The Warden says one thing about the pest situation, but people incarcerated at ACJ and people who used to work there say something totally different. I think it would be great for a 3rd party to do a thorough evaluation and make sure conditions are safe and sanitary.... Plus it would be good to make sure that the County's money isn't being wasted on subpar service. Thanks."*

**Judge Clark:**

Reading that question, I was thinking that this might be something to put on hold until after the board does its walkthrough inspection of the ACJ. We may see a lot of things that we might want to be addressed. I unfortunately was not able to attend the training that board members had about the inspections, so I do not know whether that would be part of it. Obviously, we want the facility that is pest free or as pest free as possible. I think seeing it would be one of the first steps and then determine from there. That is just my thought. I do not know whether anyone else has any thoughts about that.

**Ms. Hallam:**

Judge Clark, I owe you a follow up regarding the training. No one forgot about you, I promise.

**Ms. Moss:**

And me.

**Ms. Hallam:**

Yes, anyone who missed the first one, we will make sure that everybody gets it because it was fantastic.

**G. Emily Petersen**

*"Hello-- I just wanted to say that I was very encouraged last month to see the Board so invested in doing a jail inspection ("walkthrough"). I think it's awesome you all took the time to get trained and everything and are really taking your job on the Board seriously. Hope you are able to do one soon. Thanks!!!!!!!!!! Em"*

**Judge Clark:**

I think we will now that most of us have been vaccinated, I am not going to ask who has and who has not, and restrictions are being lifted. Once the governor lifts all restrictions, which is going to happen on or before June 28<sup>th</sup>, I think, then the board should be ready to do some walkthroughs. That would be my suggestion to the board and hopefully Ms. Moss and I can get the training before we start those.

**H. Jess Highland**

*"What will the Board do to ensure all incarcerated people are provided with fresh and healthy food, so no one is forced to rely on overpriced and unhealthy commissary food?"*

**Judge Clark:**

I think we kind of answer that one. One of the things we are going to do is we are going to need eat it too and then we will be in a better position to see that. But I think one of the good things is that the menus are posted, and anybody can look at them. One of the things we wanted to make sure, I believe it was Ms. Klein that raised this issue, is there deviation from the menu. We know that sometimes the foods are not always available for what is planned. That is one of the things that we need is to get some kind of update on looking at the menus. I think that was asked for, so we need to think about that. Ms. Hallam?

**Ms. Hallam:**

Yes, regarding the meals, I remember the Warden had said they are provided photos with the meals that are being served. I also heard that the incarcerated folks, when they are doing their videos with their family and friends on the outside, are not allowed to show the food and have been punished for doing so. Can you speak to why that is?

**Warden Harper:**

Upstairs on the video visitation is not for individuals to be eating talking to their loved ones. It is for them to converse with their loved ones and communicate. We have tables and cells for individuals to eat. Individuals in our facility will not be able to take their trays upstairs during the video calls. The video calls are for visiting.

**Ms. Hallam:**

They are not allowed to eat with their loved ones?

**Warden Harper:**

They are not allowed to take the trays up for their video calls, Ms. Hallam.

**I. Samantha Adirondack**

*"Last month I asked the following question: "Statute dictates that after each jail walkthrough, "the [jail oversight] board shall prepare a written report setting forth its findings and determinations which shall be available for public inspection" (61 Pa. C.S. § 1724(c). How can the public access the Allegheny County JOB's past walkthrough reports?" It was not answered in the meeting or in the published response to Public Comment. Please answer it this month."*

**Judge Clark:**

As far as I know, because I was on the board many years ago and I do not remember ever having any reports generated. I do not think there are any. If somebody knows differently, you can tell me. Are there reports from the walkthrough inspections Warden? If so, where would someone find them.

**Warden Harper:**

They normally gave a verbal report and it was in the minutes.

**Judge Clark:**

Yes, it is probably a verbal report that would be contained in the minutes. I do not believe that there were ever any formal reports written or posted. Ms. Adirondack, there is no place for you to go, unfortunately.

**J. John Kenstowicz, Pennsylvania Prison Society**

*"Jail Oversight Board Inspection Reports Being Made Public The state statute governing the authority of the Jail Oversight Board states the following: Section 1724, Under Powers and Duties "After each inspection, the board shall prepare a written report setting forth its findings and determinations which shall be available for public inspection" With the easing of restrictions on access regarding the pandemic, and with the Board's initiative in obtaining consultation on how best to conduct an investigation of ACJ, it appears that the Board is preparing to make unannounced inspections of ACJ. The Board in the past has not followed the above mandate regarding a written report being made available to the public. The Board has an opportunity now to make the public aware of how the Board is providing oversight of the jail through unannounced inspections. The report could consist of the following: • The date and time of the inspection and how the inspection was unannounced • The name of the Board members conducting the inspection • The reasons why the Board chose certain areas of the jail to inspect • How the Board interviewed "a cross section of inmates out of the presence of the Warden and his agents" • The Board's findings It would be very helpful if the Board's report was available in a computer folder that would be easily accessible to the public. Does the Board anticipate any investigative findings that would not be made available to the public? Thank you for your time. John Kenstowicz Pa. Prison Society"*

**Judge Clark:**

He gives some suggestions as for the inspections that I will provide to the board so that we can consider them in whatever report we want to write. I have some ideas about that so everyone is kind of taking their own notes. I do not anticipate any findings that would not be made available to the public, but something can happen that we might determine should not be made available to the public. Off the top of my head I cannot think of what that would be, but I would hate to just say absolutely not and then we do it. I want to thank the suggestions as to the things that could be included in the report. I will pass those along to the board for our consideration.

**K. Ashley Greene**

*"Last month I asked about the extermination services provided at ACJ: "How frequently are kitchens, supply areas, etc. actually being serviced? How often are housing pods actually being serviced?" The Warden responded in the public comments saying simply that "Exterminating services are provided twice a week." This is not an adequate answer. My questions are not about how frequently exterminators visit the Jail, but about how frequently they complete their contractually obligated tasks: 1) How many times per month do they complete the task of exterminating ALL kitchen areas, supply areas, laundry areas, etc? 2) How many times per month do they complete the task of exterminating ALL 35 housing pods?"*

**Judge Clark:**

I guess she wants some more specific details. I do not know whether you are able to answer that today, Warden.

**Warden Harper:**

I think I answered it already by saying that the exterminators are here twice a week. I did report that they exterminate the entire facility during their visit. I think I have answered the question.

**L. Natasha Clay**

*“Last month I asked: “Cody T. Still died at ACJ on October 1, 2020 after being injured in an “incident” that took place September 20, 2020. The cause of death was not reported and I haven’t been able to find any updates or news stories on Mr. Still’s death since October. What happened to him? What was the cause of death?” I have since learned that the cause of death was “Central Brain Herniation due to Mycotic Aneurysm due to Bacterial Endocarditis due to IV drug use.” This raises more questions than it answers, frankly. How did Mr. Still’s infection progress to the point of death while he was under the care and supervision of the County? Has the Board ever looked into the circumstances around this death?”*

**Judge Clark:**

I do not know, Warden, whether you are able to comment on that or not.

**Warden Harper:**

I cannot comment on that.

**M. Allegheny County Employee**

*“Good day to the Board and everyone present. I would like to revisit a ongoing issue at the ACJ, particularly that one the 1M employee level. The 1M employee/ Officer’s gym was closed almost a full year ago due to the increased cases of COVID-19 within the facility and surrounding county. Since that time we have made great strides to mitigate and overcome the virus within the population as a whole with such actions such as vaccination programs, active cleaning procedures and so forth. This has been reflected in the relaxed restrictions of the state and county. With all that being said, may we be able to create a plan of action be created for the opening of the 1M officer’s/employee gym? Thank you for your time and attention.”*

**Judge Clark:**

I guess they want to know is that gym going to be open and when.

**Warden Harper:**

Your Honor, we are still under a mask mandate and we are just not comfortable opening the gym right now. We are going to consult with the health department and in consultation with the health department, a determination will be made of when the gym will open.

**N. Rachel Collins**

*“Does the Board support Bethany Hallam’s proposal to pay incarcerated kitchen workers for their essential labor?”*

**Judge Clark:**

We could ask every board member to comment and I am not going to do that. I would just say this, if someone at some point wants to make that a proposal for the board's consideration and ultimate motion that we can do that. I think there are a lot of things that have to be thought out before that happens. That is the best I can say.

**O. Diana Weiss**

*“It seems the County Controller’s webpage for the Jail Oversight Board is having some problems. As of May 29th at 8pm the document linked as the April 2021 Warden’s Report is actually just the March 2021 Warden’s Report posted a second time. Meanwhile the document linked as the April 2021 Jail Oversight Board Minutes inexplicably contains the May 2021 Public Comments (starting on p. 45 of the linked PDF). When can we expect to see the following documents posted? -April 2021 Warden’s Report -May 2021 Warden’s Report -May 2021 Jail Oversight Board Minutes Thank you for your hard work, Diana”*

**Judge Clark:**

The May 2021 will not be posted until after this meeting because we have not voted on them yet. Ms. Wagner, it appears there are some glitches on the website, can you have someone check that out?

**Ms. Wagner:**

Yes, we are happy to look at that.

**P. Gretchen Smith**

*"When will JOB meetings be held in person again?"*

**Judge Clark:**

I think this is a good time, even though this is the comment period. I meant to add that in new business. I had sent an email to the board members proposing that at our July meeting next month that we began to return to in person meetings. Only one person responded back that they like to do that, and it was Sheriff Mullen. I do not know whether there is any discussion and whether we have a consensus. I do not think this is anything that takes a motion, but I just would ask is everybody in agreement to return to in person meetings beginning at the July meeting next month.

**Ms. Hallam:**

Judge Clark, I have a suggestion. I think we should return to in person meetings when the incarcerated folks at the ACJ are allowed to have visits. I think that is nice, like hey whenever they get that we will be in person. I think it is kind of like showing solidarity with the folks who have been stuck in the jail this whole pandemic. I would make a motion to do that. I would like to move for us to return to in person meetings at the meeting after the incarcerated folks in the ACJ are allowed to have visits.

**Judge Clark:**

I would just say we do not necessarily know what that is and so I would not be in agreement with that. So, there is a motion. Is there anyone that wants a second that motion?

**Ms. Moss:**

I think I will second it.

**Judge Clark:**

Alright, is there any other discussion? I will call for a roll call vote. The motion is to return to in person meetings the month after visitation is resumed at the Allegheny County Jail. Mr. Kamara is absent.

Ms. Hallam?

**Ms. Hallam:**

Yes

**Judge Clark:**

Ms. Klein?

**Ms. Klein:**

No

**Judge Clark:**

Judge Lazzara?

**Judge Lazzara:**

I am going to vote no. I think that if we can return back in July and that is earlier it is still appropriate for us to return.

**Judge Clark:**

Ms. Moss?

**Ms. Moss:**

Yes

**Judge Clark:**

Sheriff Mullen?

**Sheriff Mullen:**

Yes

**Judge Clark:**

Ms. Parees? I do not know if she is still there.

**Judge Clark:**

Ms. Wagner?

**Ms. Wagner:**

I will vote yes but I would also like to add I think it is worth for us to consider having our meetings in the Gold Room which has greater capacity of spacing in the future.

**Judge Clark:**

We had been having them in the Gold Room since I have been on the board and since I have been the Chair. I assumed that is where we were going to be having them.

I do not know if Ms. Parees was able to answer.

We have 4 that want to resume after the in-person visitation goes back and 2 nos. So, I guess we will wait.

I would just ask for some consideration because for the past 15 months I have been the recipient of the comments and it is overwhelming. Maybe someone else might want to take that over until we return in person. It is a lot of work.

**Ms. Hallam:**

Judge Clark, can I ask about the comments because I would be willing to take that task off your hands? My question would be, do they come in from one specific email?

**Judge Clark:**

I cannot answer that. What happened was when we decided to have the meetings virtually, we had to have a way for the public to have the comments, so the court created it. Our court staff created the link, the website, and a special mailbox for me. I do not know if the court is going to create a court mailbox for someone else. I guess I will continue to do it. I was just really hoping that we would go back in July, but the board has spoken and that is where we are.

***The board approved a motion (4 Yea, 2 Nay, 2 Absent) by Ms. Hallam, duly seconded by Ms. Moss, to return to in person for Jail Oversight Board meetings the month after visitation is resumed at the Allegheny County Jail.***

**Q. John Cooper**

*“Last month I asked a question about the fire set by people incarcerated in Pod 8E on April 23rd. The Warden responded in the published Public Comments “An internet blog inappropriately, irresponsibly, and erroneously reported that inmates set fire in protest.” What happened then? How did the fire start? Has the Board spoken to anyone incarcerated in Pod 8E (or anyone incarcerated in ACJ in general) to hear what they have to say about why the fire was set?”*

**Judge Clark:**

I do not know whether you can provide any information on that, Warden.

**Warden Harper:**

Yes, I can, your Honor. A burning wick fell and was placed in a vent in Pod 8E. The fire was extinguished by staff and there were no injuries, no evacuation of the pod, and the pod was aired out. Pittsburgh Fire was on site to inspect and the facility was on lockdown for a certain period of time. So that is my response.

**Judge Clark:**

I guess the question was, was this some kind of protest that was happening or if you know?

**Warden Harper:**

I really do not know. I do not think it was a protest, but I really do not know.

**R. Nancy W Graham**

*“Does the Board have any updates on the fire in Pod 8E on April 23rd? It was reported that incarcerated people set the fire to protest medical neglect, including some of them not getting their psychiatric medications, and I have been worrying about them ever since. Maybe that sounds strange but I am a mother and my heart aches when I think of how bad things must be for these people (who are all somebody's baby!!!!) to resort to such desperate measures. I bet many of them are being punished for it, and probably knew they would be punished for it but chose to do it anyway just to try to get the outside world to notice their pain. Will the Board please check in with people on the Pod and make sure they're okay? Sincerely, Mrs. Nancy W. Graham”*

**Judge Clark:**

I think that is more of a comment. Thank you, Mrs. Graham for your concern. We really appreciate that.

**S. Adrian McCauley**

*“Why doesn't ACE Fitzgerald come to JOB meetings? If possible I would like this answer directly from Ms. Parees.”*

**Judge Clark:**

I do not think Ms. Parees can answer that question. I think we talked about that at the last few meetings.

**T. Richard Smith**

*“A few weeks ago, citizens in Allegheny County overwhelmingly voted to ban solitary confinement and other torturous conditions in the ACJ. Why did it take an enormous effort by community organizations and then a vote of citizens to do this when could have been done years ago by directive of the Jail Oversight Board? Why has the JOB never really taken up the issue? And how can the JOB justify being such an apologist for the ACJ, its warden, and its horrific mistreatment of inmates?”*

and

**U. Jane Doe**

*“Allegheny County voters voted by about 70% to 30% to ban solitary confinement at ACJ. ACJ Warden Harper will [probably claim ACJ doesn't have solitary. It has Restricted Housing, which is just solitary by another name. Will the JOB take a vote to direct Warden Harper to take all necessary measures to implement the will of the voters and stop the use of restricted housing? Will it direct him to stop the use of other tortures at the ACJ?”*

and

**V. Alex Washington**

*“With the passage of the ballot initiative restricting solitary confinement, the Jail will need to update its Inmate Discipline policy and all other policies which reference the use of inmate segregation. Questions: 1) Have these new policies been prepared yet? 2) If so, has the Board had the opportunity to look at them? 3) When will these updated policies be made available to the public?”*

and

**W. Miriam Sheffield**

*“How are things changing at ACJ now that the ballot initiative against inmate segregation passed? I heard there were multiple people who had been held in segregated housing for over a year, are they back in general population now?”*

**Judge Clark:**

I am going to ask the Warden to tell us if anything has happened since ballot initiative, since this the ban of solitaire confinement limitations was passed. What is the plan for the jail to update its own policies?

**Warden Harper:**

Your Honor, we will ensure that we are compliant with Chapter 205, 30 and 31. Everyone must realize there is a cost to be compliant to this chapter. Everyone must remember that we are jail and we are not prison and this referendum is going to take some tools from my toolbar. Therefore, we will have to conduct training, make operational changes, and changes to the facility to ensure compliance. At this time they have not done or revised any policies because we have 30 days from the certification of the election to provide a report to the Jail Oversight Board and we have 180 days from certification of the election to be compliant with the rest of the referendum. I assure you that we will be compliant.

**Judge Clark:**

Maybe as we move forward, once you begin your work, we can have an update about where you are in addressing those issues. We can talk about that in future board meetings. Does anyone else have any comments?

**Ms. Hallam:**

I would like to say, Judge Clark, that we are certifying the election results on Monday, so, presumably, the August Jail Oversight Board meeting that we can expect our first report.

**Judge Clark:**

Alright, thank you. I just want to thank all the members and the public for their comments and for their interests in some of our most vulnerable citizens, those that are currently residing in the Allegheny County Jail.

**5. Review of the Minutes for May 6, 2021**

**Judge Clark:**

The next thing is a review of the minutes from the May meeting. They were sent to you with your board materials. I hope you have had an opportunity to review them. At this time, I would ask if there are any additions or corrections and if there are none, I would entertain a motion to approve.

**Ms. Hallam:**

I will move.

**Ms. Klein:**

Second

**Judge Clark:**

All those in favor?

**Others:**

Aye

**Judge Clark:**

Any opposed?

The motion is carried. The minutes are approved as submitted.

***The board unanimously approved a motion by Ms. Hallam, duly seconded by Ms. Klein, to receive the Jail Oversight Board Meeting Minutes from May 6, 2021.***

## **6. President's Report**

**Judge Clark:**

As for the President's Report, I do not really have anything additional to report at this time.

## **7. Warden's Report**

**Judge Clark:**

Next is Warden's Report. Warden Harper?

**Warden Harper:**

Your Honor, the only thing that I have to present to the board is that we did get the plaque made that was requested by Mr. Kenstowicz. The plaque has been made and we will talk about having a small ceremony as we possibly can. That is all I have for the Warden's Report.

**Judge Clark:**

Thank you and I would just like to say thanks again to Mr. Kenstowicz for thinking of that. It is lovely. He shared with Ms. Klein and me what is going to be on the plaque and it really is very nice. I think everyone will be pleased, particularly Dr. Patterson's family. Yes, Ms. Hallam?

**Ms. Hallam:**

Yes, I would just like to ask the Warden, since August is the first meeting that you will be reporting to the board regarding the ballot referendum that was passed, I would just like to ask that at the next Jail Oversight Board meeting in July that you provide the jail's plan for compliance with the solitary confinement ban ballot referendum. I would just like to see that there is a plan. That there is planning stages happening now, ahead of the actual reporting, and then final implementation in December.

**Warden Harper:**

Ms. Hallam, there is no way I am going to be able to have that to you in July. We have a lot to plan. We have six months from the certification. I assure you that the board will be briefed but it will not be that soon, Ma'am.

**Ms. Hallam:**

Okay, the first reports have to start on July 7<sup>th</sup>, which is only a week after our July Jail Oversight Board meeting, so at least the plan for the reporting process to the board, like how you are going to compile that information and how you are going to present it to the board. I would just like to see your plan for that first stage and then we can look at the plan for the December implementation as we approached that more closely.

**Warden Harper:**

Yes, I understand that.

**8. Deputy Warden's Report**

**Judge Clark:**

Now it is time for the Deputy Warden's Report. Chief Williams?

**Deputy Warden Williams:**

I am ready if you guys are ready. I would like to just start this off with this because I have seen that several other agencies recently having news articles and I think that it is appropriate to celebrate. I am very happy to report we have 0 positive cases in the Allegheny County Jail. In the month of May, we had 2 in total. It was an individual who tested positive in April and 1 individual who tested positive in May. I think that that is absolutely extraordinary. I will also say that we hold those numbers with bated breath because we recognize the seriousness of COVID-19 and the capacity of disease spread. We have been a very fortunate facility. I think luck has something to do with it but mostly the management of this facility, by the employees, as well as, their populations willingness to comply with a lot of the necessary recommendations, including mask wearing and social distancing. This has not been easy on anybody. It has been a concerted and collaborative effort between the Health Care Department, Correctional Department, and the incarcerated population, who was willing to do whatever it took to get through this time period. I did want to start with that we are very happy that we have 0 positive cases within the facility. The numbers on the website do reflect that throughout the pandemic we have tested 2,679 incarcerated individuals with diagnostic tests. A total of 346 or 13% have been found to be positive throughout the entire duration with 0 presently positive within the facility. A total of 2,383 or 87% have been negative. Today we have 20 pending tests and I actually have to revise that because we had 3 refuse. So, we had 20 tests scheduled for purposes of transfer, but we had 3 individuals refuse today which brings that to 17 pending tests. None of these individuals are presently symptomatic. They are being tested, again, just to be able to be released to community residential programs or transferred to other institutions that require those negative tests. In the last month, we have not released any individuals while they were within their disease process of COVID-19. Our lookback of comprehensive numbers for the last month, in May, we did 107 tests for the viral diagnostic test. Of those 107, all were found to be negative. Though we did have 1 positive case, as a reported, in the month of May. That individual was a new admission to the facility, we had their test from one of the rapid antigen tests and that was positive. They were symptomatic at time of test result. As you guys know, we reported on this last month, on April 12, 2021, on compliance with the Federal Consent Decree, we did begin the rapid antigen testing for increased surveillance for all new admissions in intake and on the intake housing units. At this time, and it is June 3<sup>rd</sup>, we started this process on April 12<sup>th</sup>, 1,639 rapid antigen tests have been completed, 7 were positive, which is less than 1%. We had 1,389 that were negative and 251 individuals who refused. None of the positive rapid antigen tests were for asymptomatic individuals. All individuals were placed on medical isolation if they have symptoms. So, that one individual who was tested and was positive was placed on medical isolation test. I do want to reiterate that is an extraordinary amount of tests that were done, in addition to, every other health care service that is provided within the facility. It has been an unbelievable burden that was taken on by staff. Lauren Bach, who is an infectious disease coordinator, has made extraordinary efforts, not just in making sure that these testings are in compliance with the consent decree in the appropriate timing, but also making sure that we're simultaneously continuing vaccination clinics, which I will also report on. Throughout the pandemic, we have had 347 staff report that they have been tested for COVID-19, with 139 positives. We do not presently have any individual who is deemed to be infectious, you know so an active case of COVID-19. We do have two staff members who are continuing through their recovery process and

have not yet reported to work. In terms of vaccination updates, we started vaccinating also on April 12<sup>th</sup>, it was an exciting day for us as an institution. We have partnered with AHN to do 3 separate clinics that took place on April 12<sup>th</sup>, April 28<sup>th</sup>, and June 2<sup>nd</sup>. We as an institution have our own vaccine supply, so we have held even more clinics than that. But AHN has access to Pfizer which allows us to complete people dosing for their Pfizer vaccines. They also have access to the Janssen vaccine, which we have not been able to get access to yet. We have our own supply of Moderna and have continued that. Thus far, the Allegheny County Jail has supported the vaccination of 646 individuals. We have fully vaccinated 488 individuals and provided dose one for 158 others. On site, we now have stored Pfizer, Moderna and the Janssen vaccine. That is in partnership with AHN. We presently have incarcerated at this time 402 fully vaccinated individuals. Though the numbers are different in the way that I have reported them, we presently have 402 fully vaccinated individuals. We are confirming individuals who are transferred to our facility from SCI's or other county correctional agencies, some who are returning to us from Torrance State Hospital that have received vaccines, or individuals who received full vaccination within the community. Every person who comes in at this point, we are verifying to see where they might be within their vaccination process. That is extraordinarily important because if they are due for a second dose, we need to make sure that we coordinate that effort and the timing is appropriate. We are also initiating anybody who is interested in the vaccine while they are incarcerated. We have 151 that are presently incarcerated that are within their series. Some of whom we have been responsible for initiating and some we gave dose 1 to and they have already been released into the community. We work to coordinate through AHN to make sure that they can get their second dose. The Allegheny County Health Department is also supporting those that are released to make sure that they get their second dose. Once our current population is vaccinated, meaning those that either are within their process or have received both doses or one of the Janssen vaccine, we will have 553 fully vaccinated individuals or 32% of our population. The majority of those individuals will count as fully vaccinated within the next week and a half, based on the clinics that we have been running kind of continuously throughout this time period. Every individual still has accessibility to be vaccinated. That includes our staff, as well as the incarcerated population. At any time, they can express willingness or interest. Some individuals have been approached on more than one occasion, they have expressed interest and then made their own health decisions that they do not want to seek vaccination. Every individual when they come into our institution is screened as I talked about before. We talk about vaccination with them, we verify whether or not they ever see any vaccines, and we inform them how they can receive vaccines at no cost while they are here. Within the last month, we have to play catch up. I am not sure if anybody has received comments from the incarcerated population that they are still owed their incentive. We do know that we have not gotten that to everybody, and we are working on that. Primarily, we were working on getting individuals vaccinated. In terms of employees, we have 730 eligible employees since everybody is now eligible to be vaccinated. We have 347 employees who have received full vaccination, which is 48% of our employee base population. We have 69 employees that have received one-dose of a two-dose series, which is 9%. As always, we look forward to the privileges that increase vaccinations will allow our facility to have, as well as safety. This has been a really scary time for everybody in the world, including a vulnerable population. We are very excited with the efforts that we have continued to make throughout the pandemic from disease mitigation. Particularly, we are proud of the vaccination efforts, which again has taken a lot of collaboration with our correctional staff, our healthcare staff, the incarcerated population, and our technological support. The tablets have allowed us to quickly communicate a lot of information to the population to increase their interest and knowledge of their access to vaccine. That is what I presently have for COVID-19, if you would like me to continue with presentations, I am happy to do that as well.

**Judge Clark:**

Ms. Hallam, do you have a question?

**Ms. Hallam:**

I do. Thank you. That was so much information. I really appreciate that. My first question, I think I heard you correctly but I just want to ask again to clarify, are you saying that in intake when someone comes into the jail today, they are offered a vaccination?

**Deputy Warden Williams:**

I will say this, they do not get offered the vaccine in intake. They are asked a series of questions to see if they have received any vaccinations and if they are interested in receiving a vaccination while they are with us. If they refuse, then they are told you have the opportunity to apply to be vaccinated at any time during your incarceration. We are not vaccinating individuals at intake. The reason for that is simply because we have to make sure that we verify within the state immunization records that they are not currently in process or that they have not already received a vaccine. We would like that process to be faster, but we do have to do a series of verifications.

**Ms. Hallam:**

That did clarify. Thank you for that. My only other question is the way you have been putting the COVID testing, positive and negative numbers on the dashboard, I know that has been very helpful and I am very appreciative of that. Do you think you could also do that with vaccine numbers as well?

**Deputy Warden Williams:**

As long as you do not hold me to timeliness for it because we are doing kind of rolling clinics. What I can do is work towards, in preparation for these meetings, updating the look back. It is a lot of information for us to kind of continuously update but I do recognize the need to communicate that out. We will work on getting better and up-to-date numbers on the website.

**Ms. Hallam:**

Even if it were a week or so behind, if you could just post the numbers like this many staff are vaccinated, this many incarcerated folks are vaccinated. The same way you do for the test. If you could just put "as of" date, even if it is not updated daily, which I do not think it needs to be, but maybe after each clinic. I think that would be very helpful just to see the progress around the month.

**Judge Clark:**

Ms. Klein?

**Ms. Klein:**

Deputy Warden, can you tell me? Is there any written information about safety benefits of the vaccine that is distributed to new people that are coming into the jail?

**Deputy Warden Williams:**

We have available on the tablet program, which starts on the intake housing units, all of the emergency use authorization forms, which we are required to provide to people prior to vaccination. We also have frequently asked questions. I have previously shared what is presently offered through email communications to the board and we do have hard/paper copies available as well. These are both electronic and paper form in English as well as Spanish. If someone would require that in a different language because their native language is not either of those, we have the accessibility to make that available to them in paper form as well.

**Ms. Klein:**

I just have a comment that whether you might consider opening up the gym to fully vaccinated employees, as an incentive.

**Deputy Warden Williams:**

We appreciate the comment, but we are going to still work with the Health Department before we modify any of the processes truly within the facility. We are under a Federal Consent Decree as it relates to COVID-19 in our continuing of operations plan. Congregate settings have always had different recommendations for really a strong and researched reasons because of the nature in which individuals work as well as live or reside within the institution. Everything is carefully evaluated sometimes I think people would say it takes a little bit too much time but it's important to have

thoughtful conversations with the experts to make sure that we don't jump ahead too quickly and unnecessarily put our population at risk.

**Judge Clark:**

Any other questions? Back to you, Deputy Warden.

**Deputy Warden Williams:**

I am excited to say that there is progress. Although I do not have anything definitive within our healthcare record. But we have talked specifically towards the counseling sessions and the number of individuals who are receiving counseling sessions, as well as, I believe Ms. Hallam was the one that made the request, to understand the average length of time for the session. Our business analyst who works very closely with the vendor, NaphCare, as well as administrators within the healthcare department, have created a mock up, that's what we would say, the admission management queue that will allow us to modify the electronic health care record in such a way that we can actually have a report that is driven regarding these sessions length and how many individuals have that particular contact. So, until that is done from an electronic standpoint, our psychologist has been providing more frequent reports and updates though she is not tabulating the exact minute session length for every encounter. She does have some estimates. During the last month she had 165 referrals and 12 individuals who refused to engage in any services based on the referral, for total of 153. She indicates that she has a therapeutic relationship with 72 of those 153 individuals, which would mean that she has had more than one contact with them. She continues to work with them based on the psychiatry referral, as well as other referrals or self-inquiries from the patient population. In May, she had 164 contact, with 77 of those, she would say, were definitely more than 15 minutes and up to 120 minutes. Some of the patient population have complexities or case management needs that would require longer section session length. Around 87 contacts were less than 10 minutes. It is important to note that sometimes grief counseling is what is important. Somebody may require a check in. They need to know "hey I knew you had court today and I am wondering how that went for you and how you are feeling or if you need anything additionally right now". Sometimes the patient population might state "I am good. It went really well. I am excited about it. I'm actually getting on the phone with the family member and we're going to talk about me coming home." I think that it has been a very exciting suggestion. There has been a lot of interest in the services that are provided within the institution. Because we do not bill for services in the jail, we do not normally think in terms of billable minutes or session length as most community providers would. It is really changing the way that we adapt our healthcare record to be able to better communicate about the services that are provided. I look forward to us being able to work with the vendor. I do not yet have a timeline for when the modifications will be pushed out to our health care record, but I will be sure to keep everybody updated.

**Ms. Hallam:**

I just wanted to ask a question based off of something that Ms. Klein had asked about the incarcerated folks using the gym. I thought I heard you say it had something to do with the federal consent decree. My reading of the consent decree does not say anything about the use of the gymnasiums as long as they are masked. I think Ms. Klein asked about unmasked in the gymnasium but is it no?

**Deputy Warden Williams:**

Ms. Klein asked about employees.

**Ms. Hallam:**

I thought the consent decree did not say anything no use of the gym.

**Deputy Warden Williams:**

The consent decree talks about a lot of the different restrictions, regulations, and disease mitigation. We do have an obligation right, so there is a consent decree we also have the mask mandate so vaccinated or not everybody in the institution has to wear mask. That is why you see all of us still wearing them throughout this meeting. There are a lot

of different reference points and the experts really do need to weigh in. As much as we would like to restore everything to normal in this institution, I think most of us in the world want everything back to normal, we don't want to jump ahead and make a rash decision because we are all tired of COVID and the restrictions that have been placed on us, if that could potentially place our population at risk. We know people want it. We hear that. We may want it too, but we have to put the brakes on this and talk to the people who would be able to guide us best.

**Ms. Hallam:**

I could not agree more. I just like to make sure I did not hear the wrong for the reason being because of the consent decree. I am sorry. Thank you for clarifying that.

**Deputy Warden Williams:**

I was prepared to also talk about medications for opioid use disorder because I think it is important that we talk about the continued efforts and I appreciated Ms. Venkat's notes earlier about the expansion. Last month there were 9 individuals who are prescribing Buprenorphine. This month 23 individuals as of today. So there have been far more than that within the time period that have been on the medication for opioid use disorder but presently incarcerated we have 23 individuals who are managed on Buprenorphine, the oral form. If we expanded that even further, we have individuals who are on Sublocade. Sublocade, the injectable form of Buprenorphine. Ms. Venkat was talking earlier though she did not explore details. It requires a specialty pharmacy to be able to get these, so we do not yet have access. We did have a meeting yesterday with the manufacturer of Sublocade. Additionally, we have been working with AHN closely on a number of projects. We are confident that we are going to be able to expand and continue individuals who on Sublocade on that form of medication. In the interim, we can transition that individual to the oral Buprenorphine, to make sure that they do not experience withdrawal and that they are still engaged in their medications for Medication Assisted Treatment. I will say that we have been able to coordinate with some service providers in the community who have been able to provide that medication to us while the individuals incarcerated. So, we have also administered the injection of Sublocade. We are also collaborating with the Department of Human Services. We are applying for the PCCD grant that will allow us to expand even more from where we presently are today. We hope to apply and be awarded the monies for that grant to expand to Methadone. That was what we had talked about during last month. We are making progress on the application and it is to be submitted very soon. We will get that in as well. Lastly, as far as the medical request queues that we talked about that I am reporting each month. For the sick call request medical there are 25 appointments and the longest waiting is 7 days. It should be noted, those individuals are temporarily transferred to another institution so we cannot see them. Those that are presently in our facility the longest wait for sick call requests for medical is three days. For sick call requests for mental health, there are two appointments and the longest waiting is 2 days. For psychiatry, we have 81 appointments and the longest waiting is 12 days. For mental health specialists, we have 5 appointments and they are all scheduled from today. So, the longest waiting is less than today. I know I reported it earlier, but I gave some pretty low numbers, our population is 1,726.

**Judge Clark:**

Ms. Hallam?

**Ms. Hallam:**

Thank you for those numbers. You mentioned how many people you have on Buprenorphine and Sublocade, but how many are on Methadone currently?

**Deputy Warden Williams:**

We have 0 on Methadone. We have transitioned some individuals from Methadone to Buprenorphine so that they are still engaged in medications for opioid use disorder. But since we do not have a license to provide Methadone right now, we have been transitioning people to other forms of treatment.

**Ms. Hallam:**

Do you have any idea what percentage of the people who come needing Medication Assisted Treatment that you are providing? Did you say 22? Is that the correct number?

**Deputy Warden Williams:**

I think that is going to depend on how you define needed. Clinically, people would describe that in different ways. Could you provide me some context or parameters?

**Ms. Hallam:**

Specifically, let us say, I will start with Methadone. What percentage of people that come in on Methadone are now on some sort of MAT, since you have no one on Methadone and some have switched to others? What percentage of the people come in on it are getting some sort of MAT right now?

**Deputy Warden Williams:**

I do not have that percentage but that helps for information that you are looking for. I will say with Methadone a lot of people who do not necessarily work in treatment may not be aware, but it is very easy to verify Buprenorphine treatment. Because of the expansion to so many different care providers, you do not have to go to a licensed drug and alcohol facility. Buprenorphine prescriptions are always registered into the PDMP which is the prescribed drug monitoring program for Pennsylvania. Methadone however unless it is being prescribed for pain management, is not registered in there. Methadone clinics typically have hours of operation that are very early, starting 5:00 or 5:30 in the morning and closing at 1:00 or 1:30 in the afternoon. Anytime outside of those cannot verify treatment. Additionally, you have to have a five-point release signed because we have specific confidentiality regulations for substance use information. Methadone is very complicated and tricky. It is difficult and that helps me. The only way that we can presently pull those numbers is to see who is testing positive for Methadone when they come in. It still may not give us true numbers, but it would give us a better idea.

**Ms. Hallam:**

Thank you for that. Then regarding switching the medication assisted treatment, is that common practice? That is something I have never heard of before. Are there any dangers associated with someone being on Methadone for an extended period of time then coming to the jail and now having to go on Buprenorphine? Is that a common practice? Or is that maybe just our jail or jails?

**Deputy Warden Williams:**

I cannot truly speculate on the commonality of it what I can say is that our providers would not put somebody in a health risk. With Methadone you typically do additional monitoring with EKG. It does depend on dosage and how long you been on something. They would need to make a very individualized clinical decision regarding that. I am very confident though that they would not put somebody at a medical risk to transition them to a different form of medication. I will say that this is not a popular thing to say, a lot of facilities have not been able to provide a lot of different forms of medications for opioid use disorder. This is something that criminal justice agencies are going through necessary reform for. I know that there are neighboring institutions that do not provide any forms. I know there are neighboring institutions that cannot provide methadone still, very similarly to us. I know some institutions who are only starting to explore Buprenorphine. I do not really know how common it would be to transition.

**Ms. Hallam:**

One last question. Why cannot people be who are incarcerated be accompanied to a Methadone Clinic? By jail staff, sheriff's office, county police, any sort of accompaniment to be able to go to a Methadone Clinic.

**Deputy Warden Williams:**

Well, I could say a number of things. COVID has certainly challenged every treatment provider in the community. I do not presently know what it looks like as the methadone clinics or how much onsite dosing they have been able to do.

I can tell you that methadone in general and I have worked in methadone clinics is difficult. It is not very easy. You have to confirm dosing, you have to fill out guess dosing, it is federally regulated. It is not impossible; it is just very challenging. The burden on the service provider could potentially be very high and attempting to serve them in a timely manner. That would require us to send potentially a group of people to an institution, outside of our facility, that may not be as secure as our is, for an undetermined period of time. For correctional entity that would not be a recommendation and that would certainly not follow the procedures that we typically do for any offsite appointment. So again, these things are not impossible, and we are going to explore ways that we can accommodate in the safest manner possible. It just takes extensive planning and collaboration with partners.

**Ms. Hallam:**

Thank you for that. I am just trying to figure out how accompanying someone to Methadone Clinic is any different than regular times that people get sent to the hospital from the jail. How would those processes differ?

**Deputy Warden Williams:**

I think when you come on site here or when we look at the transportation policy, we would be able to better discuss. In a meeting like this, I do not think that it is appropriate for us to discuss our transport policies, how those things happen, or the mechanisms that we would be required to do that. But I understand that there is probably some additional education that would help the context for you.

**Ms. Hallam:**

I appreciate that. I guess I am just worried about people who are in the jail right now detoxing from Methadone. But I would love to continue this conversation. Thank you for that information.

**Judge Clark:**

Thank you. Is there anything else you have to report for us, Deputy Warden?

**Deputy Warden Williams:**

No, your Honor.

**Judge Clark:**

Thank you. It was a lengthy report, but the information was very good. We thank you for being so thorough.

## 9. New Business

### A. Meeting with SisTers PGH

**Judge Clark:**

We are going to jump to new business. The first thing is Judge Lazzara is going to give a report out of our meeting with some SisTers PGH and then there is a motion she has regarding that. Judge Lazzara?

**Judge Lazzara:**

Judge Clark was kind enough to invite me to participate in the meeting with Brad Korinski, on behalf of Chelsea Wagner, along with the folks from the SisTers PGH, Ciora Thomas, Mischa Frazier, and Marilyn Blackburn on that Teams meeting, which was conducted on May 19<sup>th</sup>. The idea was to talk about what the concerns were for the transgender community about conditions of the jail and 4 major areas of concern were discussed. In order of importance, the first concern was housing. Providing appropriate, safe, and secure housing is an immediate priority due to assaults and other issues that occur in the jail. Because this is such a high priority, I do have a motion that will make it the end of the report. The second issue was perhaps the expansion of the Jail Oversight Board. This was something that the IIWF subcommittee report already noted. There is only nine of us and there is only three people from the community. The idea was that perhaps there should be an expansion of the board,

which could include representatives of other communities, including the transgender community. That is something that you are going to be exploring as we go further. It may be something that Ms. Hallam may have more of an input into because it would have to be done through the legislative process. County Council would have to draft pass and have County Executive Richard Fitzgerald sign off on. That may take a while. In the meantime, Mr. Korinski suggested that maybe there could be Advisory Board that would be made up with members of the LGBTQ+ community that could perhaps provide reports to the board from time to time. That is certainly something that we may want to look at as we move forward with this process. The third thing was the providing of re-entry services to folks in the transgender community once they are released from the Allegheny County Jail. It is certainly something that I have seen in mental health court that we really have a need for. Folks have a hard time finding housing and finding programs where they will be respected and treated well. SisTers PGH offered help with some of these issues. SisTers PGH is going to get in contact with DHS. Judge Clark going to put them in touch with Erin Dalton.

**Judge Clark:**

I already did I already. As ever, as soon as you send Erin Dalton an email she responds. I had to contact person, which I think is, I do not remember now, I want to say it is Jenn Batterton, but it may not be. I connected Jenn with Ciora Thomas by email, so hopefully they will get in touch. Erin said they are in the process of looking at their re-entry services and adding things to it, so it is like a really good time to do that.

**Judge Lazzara:**

That is hopefully moving forward, which is great. The fourth thing we talked about was the incident reporting. There are allegations that physical and sexual assaults are occurring to transgender individuals in the Allegheny County jail but it's unclear whether these things are reported or not, whether they are investigating, and whether there is any sort of consequences to that behavior. Perhaps coming up with a different type of reporting system and we are simply having some preliminary discussions now. Because the housing is the most pressing, that is where I am going to make a motion. This motion should have been provided; I think.

**Judge Clark:**

I think Ms. Carroll sent it. I could not remember whether I sent it out and she asked me when I sent it to her if she should send it out. So, I told her to send it out. Then after some thought and some things the Warden sent us about PREA that we needed to look into, I did send Judge Lazzara a few tweaks to it.

**Judge Lazzara:**

So, this is the new and improved version.

**JAIL OVERSIGHT BOARD**

***MOTION FOR THE CREATION OF SAFE, SECURE and APPROPRIATE TRANSGENDER HOUSING***

*During a TEAMS Meeting held on Wednesday January 19, 2021 between representatives of the JOB and SisTers PGH, a need for safe, appropriate, healthy and separate housing for transgender individuals incarcerated in the ACJ was identified.*

*It is SO MOVED that the ACJ create appropriate Transgender Housing that is safe, secure, and appropriate for transgender incarcerated individuals, and which addresses their medical and mental health needs.*

*It is further MOVED that a planning committee be formed within seven (7) days after the passage of this Motion to begin the process of creating a plan for safe, secure and appropriate housing for incarcerated transgender individuals. The planning committee shall consist of appropriate members of the ACJ staff, including administration, health personnel and corrections officers, as well as at least two (2) members of the JOB and two*

*(2) transgender community members. The Chair of the JOB shall select the JOB and community members of the planning committee.*

*It is further MOVED that the planning committee shall provide a comprehensive plan for the creation of safe, secure and appropriate housing for incarcerated transgender individuals to the JOB within ninety (90) days of the passage of this Motion. This plan shall include all necessary details to implement such housing.*

*It is further MOVED that, upon acceptance by the JOB of the submitted plan, the ACJ shall have sixty (60) days to implement the plan and create the housing.*

*It is also MOVED that, until the safe, secure and appropriate housing for incarcerated transgender individuals is created and operating, the ACJ shall provide to the JOB, on a monthly basis, all records of the committee in the ACJ that reviews and decides housing decisions regarding transgender individuals committed to the ACJ.*

**Judge Clark:**

So that is the motion. Ms. Hallam seconds it. Are there any discussions or questions? Warden Harper?

**Warden Harper:**

Yes, your Honor. We trust that the spirit of this motion is being offered to ensure that individuals are recognized, affirmed, and honored for their gender identity while they are incarcerated in the Allegheny County Jail. For years, this facility has continued to modify and evolve processes to support the necessary changes to support this population. In prior meetings we had previously discussed that we developed a policy with communities of leaders and stakeholders. Our policy is also in compliance with PREA. We want to continue the right to have the housing meetings to ensure that we meet all of these individuals needs and the institutional needs. I also want to talk about the PREA standard. The PREA standard 115.42G states as follows "The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates." I just wanted to read that before they made a vote for this motion.

**Judge Clark:**

Warden, I would like to say, as I was part of the small subcommittee of three people, I personally feel that there is a need based upon my conversations with members of the transgender community that have been incarcerated in the Allegheny County Jail. I do think right now, the motion is for safe, secure, and appropriate housing for them. We did take out "separate", but it could come back in depending on our review of PREA and maybe a consultation with the County Law Department or others, as to what we can do it that would be most appropriate. I will provide, whoever is on the committee, a copy of PREA and the other document that you sent us, as well as any another documents that we have regarding housing and some of the best practices that are identified in the United States with regard to transgender populations in correctional facilities. Additionally, of course the motion states that staff from the jail, including administration, be part of developing this. So, this is not going to be done in a vacuum. It is going to be done with a lot of thought and input from those the committee thought should have input into it. That would include the staff and administration of the jail, the Jail Oversight Board, members of the community, and members of the transgender community. But I thank you for bringing that up. Is there any other comments or questions? We have a motion and we have a second. If there is no more discussion, I will call for a vote.

All those in favor?

**Others:**

Aye

**Judge Clark:**  
Any opposed?

Any abstentions?

The motion is carried.

***The board unanimously approved a motion by Judge Lazzara, duly seconded by Ms. Hallam, for the creation of safe, secure, and appropriate transgender housing.***

**Judge Clark:**

It says that I have to select the jail oversight board and community members. I would just ask that anyone who is interested and also if you have any recommendations from the community members and the transgender community members, you can submit those to me. I am supposed to do this step within seven days. Also, Warden Harper, if you could give me, sometime next week, the names of the staff that you want to participate on this planning committee. Anything else for Judge Lazzara and that report?

**Judge Lazzara:**

That was it. Thank you very much.

## **B. Recommendations regarding staff exit interviews**

**Judge Clark:**

The next thing is, as you know some of the board members conducted exit interviews of the jail staff from the mental health department and from the medical department. We then met with Warden Harper and Deputy Warden Williams. We came up with 10 recommendations, which I will read to you. I think the first 7 would be presented in the form of motion. The last 3 are things that I think the committee should refer to the law department to give us their thoughts on before we present any of those for motion. I think Ms. Klein has agreed to do it. Do you want to make the motion? Do you want me to read it or do you want to read it, Ms. Klein?

**Ms. Klein:**

I am not prepared.

**Judge Clark:**

I will read it.

### **ALLEGHENY COUNTY JAIL OVERSIGHT BOARD RECOMMENDATIONS 1-7**

*The committee consisted of the following members: Bethany Hallam, Terri Klein, Barbara Parees, Chelsa Wagner and Kim Clark. The committee met with the Warden and Deputy Warden to get their perspective on some of the issues raised in the exit interviews. Consequently, the committee presents the following recommendations for approval by the Board.*

- 1. The Allegheny County Jail (ACJ) shall adopt a policy that all persons in the Allegheny County Jail shall be treated with dignity and respect, without exception. This includes, but is not limited to incarcerated residents, employees of the ACJ, volunteers, attorneys, family members and friend of the incarcerated residents, providers, etc. Appropriate signage shall be placed in the jail. The policy shall be posted on the ACJ website. This policy shall be in place by September 1, 2021.***

2. *The ACJ shall institute a formal orientation/onboarding calendar for all new hires in the mental health and medical departments.*  
***This policy shall be in place by September 1, 2021.***
3. *The ACJ should interview for the mental health and medical departments in a “group” or committee format. In other words, more than one person would conduct the interview and then candidates who seem promising should have a second interview. This way, there is discussion about strengths and challenges and different opinions can be considered before offering a position.*  
***This policy shall be in place by January 1, 2022.***
4. *The ACJ shall develop and institute a formal preceptor program for senior positions in the mental health and medical departments would last a minimum of four to six months to ensure that new hires are supported and integrated into ACJ.*  
***This policy shall be in place by January 1, 2022.***
5. *The ACJ should adopt a formal policy to prohibit corrections staff from cancelling medical appointments without consulting and obtaining permission from the medical staff.*  
***This policy shall be in place by September 1, 2021.***
6. *Staff working in the mental health and medical departments should receive special training on de-escalation techniques and other trauma-informed practices on a regular basis.*  
***This policy shall be in place by January 1, 2022.***
7. *There should be mandatory training on implicit bias and other related topics for everyone who works in the jail on an ongoing basis.*  
***This policy shall be in place by January 1, 2022.***

So, I would ask for a motion to approve. Ms. Klein is making a motion.

Is there a second?

**Judge Lazzara:**

Second.

**Judge Clark:**

Any discussion? Ms. Moss?

**Ms. Moss:**

I just have a question, you said some of them are already implemented, do you know which ones?

**Judge Clark:**

As I mentioned, the policy that prohibits corrections staff from canceling medical appointments without consulting and obtaining permission from medical staff has been implemented. Then, also we recommended a formal preceptor program but there are some things that the jail is already doing with regards to on boarding and orientation. Deputy Warden Williams, I am not sure if you want to speak to those and if there is something I left out, you can mention that as well.

**Deputy Warden Williams:**

I would love to provide comment on most if that is okay. In regard to the policy about treating individuals with dignity and respect, the jail has an ACJ code of ethics policy, as well as professionalism. Even though I do not know

if it is exactly those words, it is certainly the sentiment that everybody is to be treated humanely within the institution. We have to comply with the signage request. We do have some signs that prohibit profane language or obscenities being utilized but we do not have signs that specifically state that all individuals should be treated with dignity and respect. Then we would need to comply with posting that policy on the website. I would say one is nearly completed, we would just need to add signage and the policy to the website. In terms of a formal orientation and onboarding calendar, we have a staffing educator, who is a nurse, who does our formal onboarding process for our healthcare staff, in collaboration with our training department, who will do the security training aspects within the institution. Again, we do already have that. I would state that it is constantly evolving based on the needs of the new hires and where they are in their competences and experience. For number 3, we do already interview every new candidate with more than one person interviewing them. So, we are already doing group formats. What we are not doing is typically second interviews. I think that has mostly been related to the fact that we will do a phone screening interview first to gauge somebody's experience and level of interest before we bring them on site. The onsite interview is pretty extensive and includes a tour of the facility, so people better understand the environment in which they will be working. We have not previously endorsed that a second interview would be required because we do such an extensive interview. For number 4, again, we have an informal mentorship and onboarding program. We could formalize that, and we would support being able to do that. Number 5, corrections has never been permitted to cancel appointments without discussing with health care staff but we were happy to memorialize that in a formal written policy stating they do not have permission to do so without consultation. Typically, our medical director, assistant directors of nursing, or some other higher-level provider would be engaged in any of those conversations, if there would be a need for rescheduling or canceling. Number 6, we do offer a variety of training for health and medical staff. In compliance with the amendment for the chapter, we are going to have to increase those training for de-escalation, interpersonal effective communication skills, as well as other trauma-informed integrated training. We are in support of that as well. We have not formally done implicit bias. Over the years we have done a lot of work with Persad to make sure that we are meeting needs for individuals who may identify a different gender or transgender. We have done training specific to other topics as well but not specific implicit bias training. I think that that would be an important consideration for our agency as well. I hope that provides a little bit of context.

**Judge Clark:**

Thank you. Ms. Hallam?

**Ms. Hallam:**

How can individuals report violations currently?

**Deputy Warden Williams:**

Violations of what nature?

**Ms. Hallam:**

Violations of these policies. Under what you are outlining, how would they report violations?

**Deputy Warden Williams:**

They would do verbal reports or written reports. I would imagine that they could use \*123, which is a private line that is typically used for PREA, but they can be making a report in that manner as well. A lot of individuals incarcerated in the facility will utilize the grievance procedure. There is a specific category called staff conduct. If they have experienced an injustice or they have not been treated humanely or with dignity and respect, they can certainly formalize the report in which they get a carbon copy on as well.

**Ms. Hallam:**

Is there a way this board could also get copies of those grievances?

**Judge Clark:**

I would just saying that really does not have to do with the motion. I mean, it is part of it, but it really does not have to do with the motion. There was a question because I mentioned that some of these have been implemented or are progress and so she answered that. I would like to just get through voting on the motion, since we have a motion and a second. Are there any other questions or discussion about the motion?

All those in favor?

**Others:**

Aye

**Judge Clark:**

Any opposed?

Any abstentions?

The motion is carried.

***The board unanimously approved a motion by Ms. Klein, duly seconded by Judge Lazzara, for the Implementation by the Allegheny County Jail of Numbers 1 through 7 of the Exit Interview Recommendations.***

**Judge Clark:**

Finally, we had really two or three recommendations just dealing with how the jobs are bid on.

**ALLEGHENY COUNTY JAIL OVERSIGHT BOARD RECOMMENDATIONS 8-10**

8. *There should be mandatory training on implicit bias and other related topics for everyone who works in the jail on an ongoing basis. Persons interested in working in the mental health and medical departments should be able to bid directly for these jobs. The ACJ should be able to recruit and hire persons who want to work in these departments so that they can remain there on a permanent basis. If necessary, the pay scales and job classifications for these jobs should be revised to reflect the importance of these positions.*
9. *The Solicitor should take all necessary steps in the collective bargaining process to implement the policies contained in recommendations 8 and 9.*
10. *The policies contained in recommendations 8 and 9 shall be in place by \_\_\_\_\_, (Question when does the collective bargaining process/contract negotiation take place and when do contracts take effect after the bargaining process?)*

**Judge Clark:**

We know there is a collective bargaining process, so that is where we need the County to say yes this could possibly happen. We would refer that to the Solicitor for comment to answer these and then we may have some subsequent motions on it. I will send these to you Mr. Bacharach and maybe you can get them to answer. Anyone else that was on the committee for the exit interviews want to comment or have anything to say at this time? Or does any of the other members have any questions or comments? Yes, Ms. Klein?

**Ms. Klein:**

I read in a public comment from someone who wanted to know if we would release the information that we gleaned from these interviews. I just want to say that part of the condition that we made when we interviewed

people was that we would take that information confidentially and it would only be shared in an executive session, as a way that we could get honest opinion from them. So, if you want to look at our recommendations, maybe you could try and figure out what they said but we will not be releasing any specifics about the conversations.

**Judge Clark:**

That is correct. Anyone else? Thank you.

- C. A motion to request money from the Incarcerated Individuals Welfare Fund to be put on the commissary accounts of each incarcerated individual.**

**Judge Clark:**

We will now jump to Ms. Hallam's 2 motions.

**Ms. Hallam:**

Thank you so much, Judge Clark. The first motion, same one we do every month, is a motion to request money from the Incarcerated Individual's Welfare Fund to be put on the commissary account of each person. As of the time I drafted this, there was 1,776 folks incarcerated in the jail at \$50.00 for each person for a total cost of \$88,800. I would like to make that motion and ask for a second.

**Ms. Moss:**

Second

**Judge Clark:**

Is there any discussion?

All those in favor?

**Others:**

Aye

**Judge Clark:**

Any opposed?

Any abstentions?

The motion is carried.

*The board unanimously approved a motion by Ms. Hallam, duly seconded by Ms. Moss, to request money from Incarcerated Individual's Welfare Fund to be put on the commissary accounts of each incarcerated individual (1,776 individuals x \$50.00 = Total \$88,800).*

- D. A motion to request money from the Incarcerated Individuals Welfare Fund to be put on the tablet accounts of each incarcerated individual.**

**Ms. Hallam:**

Next motion is a motion to request money from the Incarcerated Individual's Welfare Fund to be put on the tablet accounts of each person. There are 1,776 folks incarcerated in the jail at \$50.00 for each person for a total cost of \$88,800. I would like to make that motion and ask for a second.

**Judge Lazzara:**

Second

**Judge Clark:**

Is there any discussion?

All those in favor?

**Others:**

Aye

**Judge Clark:**

Any opposed?

Any abstentions?

The motion is carried.

***The board unanimously approved a motion by Ms. Hallam, duly seconded by Judge Lazzara, to request money from Incarcerated Individual's Welfare Fund to be put on the tablet accounts of each incarcerated individual (1,776 individuals x \$50.00 = Total \$88,800).***

**Judge Clark:**

Any other new business?

## **10. Community Corrections Reports**

### **A. The Program of Offenders**

**Judge Clark:**

We will move to our Community Corrections Reports. Is someone for The Program of Offenders here?

**Ms. Morris:**

Yes, good evening. This is Michelle Morris reporting for the program. I just wanted to say regards to COVID, I heard all of the information from the Deputy Warden. I know that initially we had some issues out of male facility in regards to several of our clients tested positive for Covid but I can say at the female facility out in West Homestead in the last 15 months, we only had one resident test positive. That just occurred this past May. I think the staff have done a tremendous job in making sure the women stay safe, as well as our staff. We have 75% of our staff who are fully vaccinated, and we have probably about 40% of the current client's census that are fully vaccinated. We have several clients have been released in the last couple of months who left the facility fully vaccinated. We are really glad and happy about that. We continue to encourage our staff and our clients to get vaccinated but again it is up to everyone's discretion as to whether or not they want to do that. But we continue to encourage them to do so. With that being said, we are starting to permit support systems to come back into the facility. MYAS is currently doing trauma-informed treatment with the women onsite at West Homestead. We are also starting to receive support from the AA/NA community to come back into the facility to run NA meetings with the clients. Also, our clients are starting to go out to get jobs now, which is really great. We are also encouraging to try to get our census up. Our numbers have been pretty low since COVID, but we are really working hard with the jail and other community resources to increase our census. It has been really difficult year for us, as well. I think we have done a tremendous job, in regard to COVID, in terms of keeping our numbers down and in keeping our clients and our staff very safe. Thank you.

**Judge Clark:**

Any questions? Thank you.

## **B. The Renewal Center**

**Judge Clark:**

The Renewal Center?

**Adam Zak:**

Good evening. Adam Zak reporting for Renewal Inc. In regard to our county reentry population 71% of the men and women in the program are currently employed. We continue to assist with their job search and also work closely with local businesses. Starting up again next month, Divine Intervention Ministries will resume coming inside our facilities and will be conducting Bible studies. That is all I have to report this month. Thank you.

**Judge Clark:**

Any questions? Thank you.

## **C. Electronic Monitoring**

**Judge Clark:**

Then we have electronic monitoring.

**Steve Esswein:**

Good evening. Steve Esswein from the Probation Office. We do not have anything outside of the report that has been submitted. I like that we did have 104 individuals complete successfully during that period.

**Judge Clark:**

Any questions? Thank you.

## **11. Adjournment**

**Judge Clark:**

There is no additional business at this time. I would entertain a motion to adjourn and we can then go into executive session. Yes, Ms. Hallam?

**Ms. Hallam:**

I was just making the motion to adjourn.

**Judge Clark:**

All those in favor?

**Others:**

Aye

**Judge Clark:**  
Any opposed?

Ok, so we are adjourned. All of those who are not members of the board and the public, we would ask that you exit at this time.

Kindest regard,

A handwritten signature in blue ink, appearing to read "Chelsa Wagner". The signature is written in a cursive, flowing style.

Chelsa Wagner