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7	ALLEGHENY COUNTY
8	JAIL OVERSIGHT BOARD MEETING
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12	Thursday
13	July 6, 2023
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18	Gold Room
19	4th Floor
20	Allegheny County Courthouse
21	436 Grant Street
22	Pittsburgh, Pennsylvania 15219
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1	COMMUNITY CORRECTIONS PRESENTERS	
2	Michele Morris - Passages to Recovery	
3	Darren Hood - The Renewal Center	
4		
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6		
7	PUBLIC SPEAKERS:	
8	John Kenstowicz	
9	Fran McDowell	
10	Marianne Novy	
11	Jane McCafferty	
12	Patrick Tierney	
13	John Bolanos	
14	Laura Perkins	
15	Megan Heim	
16	Kyna James	
17	Ann McStay	
18	Shabaka Gay	
19	Sister Barbara Finch	
20	William Mistick	
21	Marion Damick	
22	Tanisha Long	
23	Josh Thieler	
24	Alex Phillips	
25	Sam Lew	

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1	PUBLIC SPEAKERS (cont.)	4
2	Brian Englert	
3	Sharon Bonavoglia	
4	Tim Stevens	
5	Roy Blankenship, Jr.	
6	Will Parker	
7	Brad Korinski	
8	Rachel Radke	
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## PROCEEDINGS

(4:04 o'clock p.m.)

## WELCOME, CALL TO ORDER AND RULES

afternoon, everyone. I want to first begin by welcoming you and saying before we go any further, Terri Klein -- unfortunately, her mother passed, so she will not be present at tonight's meeting. I ask that you keep her in your -- and her family in your prayers and your concerns and your thoughts.

With that being said, we're going to call the meeting to order. I'd ask that everyone extend the same courtesy and respect to everyone in the meeting that you would expect in return. There will be no over-talking, yelling, or inappropriate remarks. If you engage in that behavior, we unfortunately will have to ask you to leave the meeting. So I'd please ask that you extend the same respect and courtesy to others that you would expect in return.

With that being said, Abass Kamara?

MR. KAMARA: Here.

JUDGE HOWSIE: County Controller

25 | Corey O'Connor?

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1	MR. HERBINKO: Ryan Herbinko for	
2	Controller O'Connor.	
3	JUDGE HOWSIE: Thank you, sir.	
4	Richard Fitzgerald?	
5	MS. LIPTAK: Jennifer Liptak here	
6	for County Executive Fitzgerald.	
7	JUDGE HOWSIE: Judge Lazzara?	
8	JUDGE LAZZARA: Present.	
9	JUDGE HOWSIE: Sheriff Kraus?	
10	SHERIFF KRAUS: Here.	
11	JUDGE HOWSIE: Gayle Moss?	
12	MS. MOSS: Present.	
13	JUDGE HOWSIE: County Council	
14	President Pat Catina?	
15	MS. HALLAM: It's Bethany Hallam.	
16	JUDGE HOWSIE: All right. With	
17	that being said, we will	
18	MS. HALLAM: Also, Judge Howsie.	
19	For the record, I just want to object to the	
20	participation of two illegal designees,	
21	Mr. Herbinko for Controller O'Connor and	
22	Ms. Liptak for County Exec Fitzgerald.	
23	JUDGE HOWSIE: That being said,	
24	we'll now hear from County Corrections. We'll	
25	have the Passages to Recovery Report.	

## COMMUNITY CORRECTIONS REPORT

MS. MORRIS: Good afternoon,
everyone. I'm Michele Morris from Passages to
Recovery. It's M-I-C-H-E-L-E M-O-R-R-I-S.

And since our last report here, we currently have a census of 32 clients. And of those 32 clients, we have 27 DOC clients. We've had 13 admits since June 6th, and 7 successful discharges.

Currently, we have around 4 clients who are currently working. And we just started implementing a new program through PAR, which is -- I think it's Parents in the Know. They are doing a trauma support group and a parenting group as well. So that just started last week.

And we are also strengthening our relationship with UPMC. We have a few of our clients who are currently enrolled in their training programs.

So any questions? Yes.

MS. HALLAM: Hi. You mentioned that you had seven successful discharges.

MS. MORRIS: Yes.

MS. HALLAM: Did you have anybody

25 that got sent back to jail?

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1	MS. MORRIS: We had a few, I
2	believe, like two or three. Yes.
3	MS. HALLAM: Okay.
4	MS. MORRIS: Yes.
5	MS. HALLAM: And do you keep track
6	of any overdoses at your facility? Is that a
7	number
8	MS. MORRIS: So I thought you would
9	ask me that question today, so since January,
10	we've only had two, and they were seen in the
11	emergency room and released back to the program,
12	and then they were ultimately returned to the
13	county jail.
14	MS. HALLAM: All right. That's all
15	I have. Thank you so much.
16	MS. MORRIS: Okay. Thank you.
17	JUDGE HOWSIE: Any other questions?
18	(No response.)
19	JUDGE HOWSIE: Thank you, ma'am.
20	MS. MORRIS: Thank you.
21	JUDGE HOWSIE: We will now hear the
22	report from the Renewal Center.
23	MR. HOOD: Good afternoon,
24	everybody. Darren Hood with Renewal,
25	Incorporated, D-A-R-R-E-N H-O-O-D.

Census for Renewal in our work release is 79, 23 inpatient, giving us a total of 102. Employment percentage is 71 percent right now. The average wage is \$14.28 an hour.

Out of two essay contestants, I'm happy to report that a county reentrant who is currently attending CCAC studying in the field of Social Work won Renewals Annual Betty Esper Scholarship Contest. Contestants must write an essay on how they would use the scholarship to better themselves, along with past and present accomplishments they are making and striving to become more responsible and successful citizens reentering the communities. He will be awarded \$1,000 towards his cost of schooling as a result of his outstanding essay.

Also, Get Paid is a sister company of Renewal, Incorporated. Get Paid stands for Gaining Employment Through Planning and Advocacy Initiative and Dedication. It's a six-month on-the-job training program for individuals reentering the workforce. Get Paid is also in partnership with Downtown -- or Pittsburgh Downtown Partnership, the guys in the yellow

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jackets, T-shirts, cleaning up the streets.	10
Again, I'm pleased to report that one of our	
Renewal county reentrants is completing his	
Get Paid employment training and will be	
obtaining full-time employment with Pittsburgh	
Downtown Partnership's Clean Team as a result.	
That's all I have.	
JUDGE HOWSIE: Any questions?	
Ms. Hallam.	
MS. HALLAM: Hi. Yeah, same	
question. How many folks in the past month were	
sent back to jail?	
MR. HOOD: Total number, I don't	
have those numbers.	
MS. HALLAM: Okay. Can you ask if	
yinz can start bringing those to the meetings	
just so we can keep track of how many people were	
successfully completing versus how many people	
were not?	
MR. HOOD: I can do that.	
MS. HALLAM: Thank you. And then,	
do you know of any overdoses that have happened	
in the facility since the last meeting?	
MR. HOOD: There has been none.	
MS. HALLAM: There haven't been any	
	Again, I'm pleased to report that one of our Renewal county reentrants is completing his Get Paid employment training and will be obtaining full-time employment with Pittsburgh Downtown Partnership's Clean Team as a result.  That's all I have.  JUDGE HOWSIE: Any questions?  Ms. Hallam.  MS. HALLAM: Hi. Yeah, same question. How many folks in the past month were sent back to jail?  MR. HOOD: Total number, I don't have those numbers.  MS. HALLAM: Okay. Can you ask if yinz can start bringing those to the meetings just so we can keep track of how many people were successfully completing versus how many people were not?  MR. HOOD: I can do that.  MS. HALLAM: Thank you. And then, do you know of any overdoses that have happened in the facility since the last meeting?  MR. HOOD: There has been none.

Monitoring.

Steve. He told me earlier this week he would be unavailable for the meeting, but I assumed he would send someone else.

Well, I guess we will not hear from Electronic Monitoring.

All right. With that being said, we'll begin the Public Comments. We have a lot of people that have indicated that they would like to give public comments tonight. I'd ask that you limit your public comments to three minutes. When you hear the timer go off, I'd ask that you stop talking and give everyone an opportunity to speak and give their public comments as well.

So first we'll have Mr. Kenstowicz,
John Kenstowicz.

MS. HALLAM: Judge Howsie, before the first public commenter goes, did we get any online public comments?

JUDGE HOWSIE: Not one.

MS. HALLAM: Okay.

JUDGE HOWSIE: And we re-corrected the system. We tested it, so there are no issues with our online system. There was a problem in

the past, and I apologize for any inconvenience
that that might have caused people. We had no
way of knowing. We just weren't receiving public
comments, but when we tested it, there was an
issue with the online public comments. It's been
rectified. We did not receive any public
comments on it.

MS. HALLAM: Thank you.

JUDGE HOWSIE: Sure.

MR. KENSTOWICZ: John Kenstowicz,

K-E-N-S-T-O-W-I-C-Z.

The following is a summary and analysis of the ACJ Healthcare Staff Job Satisfaction Survey that was provided to our healthcare staff from June 7th to June 29th of this year.

Structure of the Survey. This survey includes 16 close-ended multiple-choice statements related to morale, pay, and benefits, safety, licensing, workload, relationship with administration, and training.

The survey also includes 4 open-ended questions regarding staff retention and turnover, communication with administration and licensing, in which the staff could express

in their own words their insights and feelings about these very important matters.

Participation Rate. 31 healthcare staff participated in the survey out of a possible 39 staff, which is a 77 percent participation rate. Healthcare staff from contract agency did not participate in the survey because a different kind of survey will be designed and offered to them. Confidentiality is protected. Google Forms Program was used, which protects the identity of the person participating in the survey. The person's name who is completing the survey is not revealed to the person administering the survey.

Healthcare staff serious dilemma. The healthcare staff have a serious dilemma. The vacancy number of healthcare staff at our jail has reached 94. In this survey, you will hear healthcare staff talk about the tremendous challenge they have in attempting to provide a quality service to individuals in need with a burdensome workload, and yet they are obligated to follow the mandates of their licensure.

Goal of the Survey. The goal in providing this survey is to give a voice to the

staff on the front lines, hear their story, and give them a platform to articulate their needs and ideas about change. Our goal is to facilitate their responses.

Project Administration and
Processing Results. This survey project was
administered by myself with consultation of the
results and presentation to the Jail Oversight
Board by the Pennsylvanian Impact Interfaith
Network, PIIN.

Statements in Pie Chart Form. The first part of our survey is a presentation of results of our 16 statements which have been made into colorful pie charts. Multiple choice of possible answers are strongly agree, agree, neutral, disagree, or strongly disagree.

I Feel Valued and Respected As a
Healthcare Employee At the Allegheny County Jail:
61.3 percent strongly disagree with that
statement. Is that it?

JUDGE HOWSIE: Yes.

MR. KENSTOWICZ: I'll just finish this pie chart, okay? 29 percent disagree.

JUDGE HOWSIE: Thank you, sir.

1 Fran McDowell. 2 MS. McDOWELL: Fran McDowell, 3 M-C-D-O-W-E-L-L. 4 JUDGE HOWSIE: Thank you. 5 MS. McDOWELL: Staff Morale is a 6 Major Problem At the Allegheny County Jail: 7 93.5 percent strongly agree. 8 I Am Fairly Paid for What I Am 9 Asked to Do: 41.9 percent disagree, 38.7 percent 10 strongly disagree, 12.9 percent were neutral. 11 I Am Safe Working at the Allegheny 12 County Jail: 29 percent strongly disagree, 29 13 percent disagree, 29 percent were neutral, and 14 12.9 percent agree. 15 I Am Able to Complete All of My 16 Responsibilities Throughout the Day While 17 Providing Quality Healthcare to My Patients: 18 41.9 percent strongly disagree, 38.7 percent 19 disagree. 20 The Healthcare Administrator At the 21 Jail is Oualified to Make Medical Decisions 22 Regarding Patient Healthcare: 83.9 percent 23 strongly disagree, 12.9 percent disagree. 24 Healthcare Management Communicates

Effectively With Me and Answers Questions and

1 Concerns About Job Duties: 71 percent strongly 2 disagree. 16.1 percent disagree. 3 There Are Enough Healthcare Staff 4 to Fill All Shifts: 90.3 percent strongly 5 disagree, and 9.7 percent disagree. 6 Change the chart, please. 7 Administration's Expectation of 8 Time Management on My Job is Realistic: 54.8 9 percent strongly disagree, 25.8 percent are 10 neutral, 19.4 percent disagree. 11 Upon Starting Employment I Received 12 an Adequate Orientation Regarding the Policies 13 and Procedures of Our Jail: 38.7 strongly 14 disagree, 32.3 were neutral, and 16.1 disagree. 15 I Have Been Properly Trained to 16 Perform All of My Work Duties: 32.3 percent 17 strongly disagree, 29 percent agree, 16.1 percent 18 disagree, 16.1 percent were neutral. 19 The Demands of My Job Have 20 Negatively Affected My Physical and/or Mental 21 Health: 64.5 percent strongly agree, 16.1 22 percent agree, 12.9 percent were neutral. 23 Change the chart, please. 24 Management Understands the 25 Challenges I Experience While on the Job:

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1	74.2 percent strongly disagree, 19.4 percent
2	disagree.
3	Management is Receptive to My
4	Feedback and Suggestions: 71 percent strongly
5	disagree, 12.9 percent disagree.
6	I Am Informed of Corrective
7	Information Regarding Critical Incidents Such As
8	Deaths Or Suicides: 58.1 percent strongly
9	disagree, 32.3 percent disagree.
10	Circumstances Exist At the
11	Allegheny County Jail That Threaten the Licenses
12	of Healthcare Staff: 77.4 percent strongly
13	agree, 9.7 percent agree.
14	JUDGE HOWSIE: Thank you, ma'am.
15	Thank you.
16	I'm not sure of this last name, but
17	it's Marianne as I don't know if that's Noy
18	or
19	MS. NOVY: "Novy." It's like Navy
20	with an O.
21	JUDGE HOWSIE: It looks like a U.
22	I'm sorry. Marianne Novy.
23	MS. NOVY: Yes, thank you.
24	JUDGE HOWSIE: Thank you.
25	MS. NOVY: And my first name is

spelled M-A-R-I-A-N-N-E. Thank you.

Section 2 is a summary of the 16 close-ended multiple-choice statements.

Staff Morale. Healthcare Staff
Recognize a Serious Problem of Morale Working At
the Allegheny County Jail. 91.3 percent of
respondents strongly agree with the statement
staff morale is a major problem at the Allegheny
County Jail.

Also 91 percent -- 3 percent strongly disagree with the statement I feel valued and respected as a healthcare employee at the Allegheny County Jail.

Morale and being valued in the workplace profoundly affect the staff's sense of purpose in why am I working here. Excessive workloads. The lack of staffing, the large workloads that are assigned is a major problem.

100 percent of respondents disagreed or strongly disagreed with the statement there are enough healthcare staff to fill all shifts.

Over 78 percent of respondents disagreed with the statement I'm able to complete all of my responsibilities throughout the day

while providing quality care to my patients.

Feeling rushed through their shifts and not being able to spend quality time with their patients affects their sense of duty and responsibility to

their patients.

Related to this work overload problem, over 78 percent disagreed or strongly disagreed with the statement: Administration's Expectation of Time Management on my Job is Realistic. No one agreed with that statement. Serious staff shortage significantly contributes to this high response.

administration. Communication with healthcare administration is also cited as a major problem.

95 percent of respondents disagreed or strongly disagreed with the statement that healthcare management communicates effectively with me and answers questions and concerns about my job duties.

87 percent of respondents disagreed or strongly disagreed with the statement that management is receptive to my feedback and suggestions. No one agreed with that statement.

412-897-2010 -- 412-461-1838 (FAX)

All the respondents disagreed with

1 the statement that management understands the 2 challenges I experience on my job. 3 respondents are saying is that communication 4 occurs in a top-down relationship, highly 5 directive, with healthcare staff not having the 6 opportunity to contribute their expertise in how 7 operations can improve or how they are coping 8 with the many challenges on their job. This kind 9 of relationship can seriously affect morale and 10 staff's tolerance to manage the many challenges 11 of their job. 12 91 percent disagreed or strongly

91 percent disagreed or strongly disagreed with the statement I'm informed of corrective information regarding critical incidents such as deaths or suicides. No one agreed. This correlates with what NCCHC found in its mortality investigation of our jail.

JUDGE HOWSIE: Thank you, ma'am.

Jane McCafferty.

MS. McCAFFERTY: It's

M-C-C-A-F-F-E-R-T-Y.

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JUDGE HOWSIE: Thank you.

MS. McCAFFERTY: HSA

Qualifications. The relationship is also

25 affected by the healthcare staff's belief that

the healthcare administrator is not qualified to make healthcare decisions regarding patient care. With no one agreeing with the statement, the healthcare administrator at the jail is qualified to make medical decisions at the jail.

Healthcare licensure. Related to this response is the belief that staff's licenses are threatened working at our jail with over 90 percent agreeing that the statement that circumstances exist at the Allegheny Jail that threaten the licenses of healthcare staff.

Healthcare licensure seriously affects staff's livelihood. Having a violation on their record can affect their pay, a promotion, and opportunities to find other work. Being confronted with an order to perform a duty that violates licensure protocol significantly raises staff's stress and vulnerability to negative consequences. This licensure problem can be a significant communication barrier between staff and administration. The licensure problem can also have a serious effect on staff turnover.

Staff's Physical and Mental Health.
80 percent of staff agreed with the statement,

the demands of my job have negatively affected my physical and mental health. Balancing the major stressors at work with the stressors and responsibilities in staff's personal life will affect their decision to work at the ACJ.

JUDGE HOWSIE: Thank you, ma'am.

Patrick Tierney.

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MR. TIERNEY: In Section 3, Open-Ended Questions and Answers.

First question, what are your recommendations that would reinforce your decision to continue work at the ACJ. Answers, "Adequate staffing and increase in wages comparable to what agency staff get paid." "Two consecutive days off instead of being split. Friday and Monday could be considered weekend days to help with this." "Adequate staffing is of utmost importance. Proper training of new staff is currently nonexistent. New employees are overwhelmed by the lack of communication and training. Existing employees are continuously training new staff that either quit or are fired, which is incredibly draining." "The feeling of being valued as frontline workers, acknowledgment of the difficulties we endure as frontline

workers. Significant considerations of how the job impacts our lives, respect and acknowledgment of non-work-related commitments. Alignment between what is said and what is actually done. Perspectives of frontline workers must be taken seriously." "Management needs to change. people who have absolutely no medical experience or licensure overseeing and overruling physicians, nurse practitioners and nurses and their decisions in patient care is completely out of line, unethical, and unsafe. Management only 12 communicates with each other, not the staff beneath them who are their frontline." "Having medical management and frontline staff working together instead of medical management hiding on the fifth mezzanine level in their offices. Frontline staff cannot do their jobs properly when a non-medical manager is instructing them on what they must do. Training is provided on the computer. The training online does not provide an opportunity to ask questions or raise concerns." "Increase staffing, pay shift differential, education, knowledgeable medical management. Obtainable goals, availability of equipment needed, availability of providers,

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1 medical and mental health when needed. Safety. Methadone and Suboxone administration by outside 2 3 agencies that are familiar with administration." 4 "Staff the building. Employees are hired. They 5 just aren't able to keep them because of the way 6 they're treated. Management does not care about 7 quality of work. All they care about are the 8 numbers and how many inmates can be seen in a 9 shift. Inmates are not getting proper care. 10 Management is too punitive and constantly writing 11 employees up for petty, petty things." 12 JUDGE HOWSIE: Thank you. 13 John Bolanos. 14 MR. BOLANOS: "Bolanos." 15 JUDGE HOWSIE: Bolanos. 16 MR. BOLANOS: Spelled B as in boy, 17 O-L-A-N-O-S. 18 JUDGE HOWSIE: Thank you. 19 MR. BOLANOS: For your peers that 20 terminated employment at ACJ, why do you think 21 they left? "Low morale, inadequate staffing, 22 poor unqualified management, hostile work 23 environment, sexual harassment, management that 24 gossips and repeats personal information to other 25 frontline staff. Forced to falsify

documentation, fear of discipline, fear of targeting if they didn't agree with an illegal and unethical decision." "Mental and physical exhaustion, safety concerns, poor wages, fear of losing their licenses." "Hostile work environment. Severe sexual harassment resulting in false rumors about employees, affecting relationships outside of work, underpaid and highly overworked." "They were overwhelmed, and inadequate training was key. The work burden was too much." "Toxic work environment and unethical practices." "Because of poor attitudes from management, being required to complete tasks that put their licenses at risk. Low staff morale, poor working environment." "Lack of training. Licenses are being put in jeopardy. Overwhelming assignments because management can't staff the building. Harassment and bullying by upper management." "Non-medical leadership, poor management, micromanaging, lack of training, inconsistent schedules, lack of respect, not feeling safe, toxic environment, lack of staff causing multiple unsafe duties of another employee. Poor pay, working overtime and not receiving it, scared to lose their license, lack

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"Communication is difficult because we just can't handle all of the inmates' needs. Many are actually legitimate, and they wait and wait with no end in sight for even a necessary prescription to be filled. The nurses are all burned out because the clinic and medical housing unit cannot operate efficiently due to the cramped size of the Medical Department and the fact that there are not enough providers and nurses ever. The pharmacy is too small to meet the jail's Oftentimes the nurses can't give meds needs. because the pharmacy hasn't gotten them in yet. This creates frustration and resentment for employees who have to try to explain to inmates over and over again that they are waiting for meds to come in." JUDGE HOWSIE:

Thank you, sir.

Laura Perkins.

20 MS. PERKINS: Hi, there. Laura,

L-A-U-R-A, Perkins, P-E-R-K-I-N-S.

JUDGE HOWSIE: Thank you.

23 MS. PERKINS: Question. Do you

24 have any recommendations on how to improve

25 communication between management and staff?

"Management needs to be competent in their position and not gaslight staff or be unresponsive when questions or crises occur." "I would suggest that they ask the nurses' opinions before they make changes by having multiple meetings so we could all attend." "Not possible with current management who are focused on maximizing their own power and control." "They need to come out of their offices and show their faces in the Medical Department." "They are not willing to communicate. They refuse to respond to e-mails and walk away when they are approached by an employee asking a question they can't answer. With the staffing issues at the jail, every member of management should be in there every shift helping out. That never happens." "How about they listen since they are not the one doing the work. Include staff. Not having monthly meetings out as we have done this or that." "Monthly meetings. They need to be around more often instead of hiding in their offices." "Management who actually answer e-mails rather than leave them unanswered for weeks and sometimes months at a time, if at all. Listen to the frontline staff who work on the job

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on a day-to-day basis. Respond with care to the needs of employees and inmates." "Management should do rounds with the employees at least once and actually see what goes on day by day. It's easy to dictate when you're not actually doing the job, but when you're physically there, maybe they will have a better perception of your daily routine. You can't tell someone to do their job if they don't even know what their job entails." "For starters, aside from the ADON, management no longer shows their face anywhere other than on 5-M, the Employee Lounge and the Town Hall Meetings. Maybe they could be present in order to communicate. If there's a reason that medical staff can't get the daily -- is there a reason that the medical staff can't get the daily operations report? Many times we aren't told when the jail is on lockdown and are expected to pre-pour meds after we have attempted to start our pass."

JUDGE HOWSIE: Thank you, ma'am.

Thank you, ma'am.

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Megan Heim.

MS. HEIM: Thank you. If you agree or strongly agree with the question above,

circumstances exist at the Allegheny County Jail that threatens the licenses of healthcare staff, please elaborate on these circumstances. jail tries to force healthcare staff to complete tasks that are outside of their scope of practice due to the staffing crisis which is unethical. Any person who is licensed and completes a task out of their scope of practice is liable to lose their license and face legal scrutiny. Also, when a staff is qualified in a practice, management will not listen to them or acknowledge them when they discuss an unethical practice. They believe their policies overrule State and Federal laws." "MH staff with no medical background, education, or training are forced to triage inmate medical complaints. This is unsafe. This is putting inmates' health in jeopardy." "Absolutely without proper staffing, our licenses are threatened. Staff are forced to pre-pour medications. This is illegal." "Insisting that a non-RN individual perform RN required components of tech care notes. Failure of a supervisor to provide adequate supervision and guidance for limited permit licenses. Having mental health and medical personnel perform

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1	31 duties that fall outside of the realm of their
2	education or experience, example, segregated
3	rounds, restrain policy and procedure." "Nurses
4	have been asked to do certain things with PICC
5	lines that they should be sent to the hospital to
6	have done. Just one example that if a nurse
7	refuses, they can be retaliated against by
8	management. There is discord and mistrust, also
9	frustration that management without medical
10	backgrounds are in charge of the whole medical
11	department." "There's typically one RN working
12	in the medical housing unit. Most days, that is
13	the only healthcare employee working in there.
14	No MA, no LPN and no other RN. At times this
15	nurse may also have to complete a med pass
16	leaving the unit unattended. The RN is
17	responsible to go to all the medical emergencies,
18	again, leaving the unit unattended."
19	Thank you.
20	JUDGE HOWSIE: Thank you, ma'am.
21	Kyna James.
22	MR. JAMES: Kyna James. Last name
23	J-A-M-E-S.
24	MS. LIPTAK: I'm sorry. Can you
25	spell your first name for me, please?

MR. JAMES: K-Y, N as in Nancy,

2 sorry, A.

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MS. LIPTAK: Are you okay?

MR. JAMES: Yeah, I'm good. know, raspy voice problems. "The HSA put out a policy that states an RN and an unlicensed personnel can count narcotics, which is against the American Nurses Association Guidelines, not to mention against the Pennsylvania State Board of Nursing Policy. It must be two licensed The DHSA Amy Shaw, RN, also stated it is okay for a nurse to pour meds for another nurse to pass. This is illegal, and you can lose your nursing license." "Supervisors have forced staff to falsify documentation. Doctors are no longer employed -- doctors who are no longer employed have had their signatures used without consent. Tech care staff have removed notes from charts." "Multiple days a week on multiple shifts one RN is responsible for all five inmate units, three of them acute. This is dangerous, and nurses are not able to abide and complete all of their This is putting their license in jeopardy and impacting inmate care. This is how mistakes are made by being forced to do work that is not

1 able to be completed." "Management does not care 2 about the licenses of the employees. They make 3 policies that directly go against nursing 4 licenses, and they knowingly attempt to force 5 people to do things that go against licenses. 6 The strong-willed employees push back and will 7 refuse, but the weaker employees will oftentimes 8 go along. The strong-willed will inevitably get 9 targeted by the administration." "Intake is 10 chronically understaffed. If there is an RN 11 there, it's typically only one in the entire 12 Intake area. A medical assistant, captain, or 13 sergeant frequently medically clears the inmates 14 for incarceration. By the time inmates get back 15 to Processing to see the RN, it could be two to 16 three days they have been in Intake without 17 medication and without seeing Medical at all. 18 Mental health is also lacking in the Intake area. 19 They are supposed to be there 24 hours a day. 20 plethora of shifts go unattended without inmates 21 in Intake every week." 22 JUDGE HOWSIE: Thank you. 23 Ann McStay. 24 MS. McSTAY: Ann McStay, A-N-N 25 M-C-S-T-A-Y.

JUDGE HOWSIE: Thank you.

MS. McSTAY: Okay. This is the section about analysis of the data. So as we've heard, this -- and this is a summary. Higher pay. Several of the responses mention the need for higher pay and that their pay is not competitive with other workplaces. Considering that the market demand for healthcare staff is high and we have 94 healthcare staff vacancies at ACJ, it appears these statements need to be taken very seriously.

Training. Several responses in the survey talked about the ineffective "checking the box" computer training. Relevant in-person training is asked for with special emphasis on training new staff who have a significant risk of terminating without needed orientation and training. They're unprepared.

Concern for Physical Safety.

Several of the responses emphasize the problem of healthcare staff not being safe. A couple of responses mentioned cases of sexual harassment.

The staffing crisis of the correctional officers can seriously affect the healthcare staff's concerns for safety. If staff believe they are

not working in a safe environment, it can affect their performance and their relationship with their patients.

Administration's Expectations. This problem of having too much to do on a work schedule and not being able to provide quality care to patients is an overriding concern. Healthcare staff can experience added custodial and patient concerns, which extend their work schedule. Respondents claim that administration's expectations are not in line with the demands of the job. They are asking for administrators to listen to their experience and recognize their expertise regarding how best to perform on the job.

Authoritarian Structure

Communication Between Administration and Staff.

Throughout the survey, a top-down structure of communication was cited with staff having very limited opportunity to provide feedback because of the directive mode of communication being used by administration. The suggestion for administrators to spend time in the blocks supporting frontline staff and seeing the many challenges of healthcare staff can start to

1 change this authoritarian relationship.

Administrators actually performing work duties would be even more efficient in changing that relationship.

During Laura Williams' tenure, administration assisted with performing some work duties. When she terminated employment at ACJ in February of 2022, the vacancy for healthcare staff was at 52, which is almost half of what it is now.

Lack of Medical Expertise on the

Health Services Administrator. The health

service administrator does not have a medical

background. She has a Doctorate in Philosophy.

Therefore, a collaborative model of communication

between administration in general and frontline

staff, professionals sharing each other's

expertise, is even more important to ensure

proper, safe medical practices.

Healthcare staff licensure is being threatened. The survey provided many examples of administrative orders violating licensing protocols representing a list of 21 situations of duties that are assigned, which staff recognize as violating licensure protocol, and that was

provided to you all yesterday. Forcing staff to violate licensure regulations is just -- you're asking people to leave the job that you just hired them for.

JUDGE HOWSIE: Thank you very much. Shabaka Gay.

MR. GAY: Andre Shabaka Gay, S-H-A-B-A-K-A.

In conclusion, healthcare staff at our jail are in a perilous situation with how we -- burdensome workloads, safety concerns, conflict with administration, licensure interference, and high staff turnover.

Administration, and the public needs to rally to give the healthcare staff the support they need to continue to dedicate to the work many of them love, providing quality healthcare to those in need. The Board needs to initiate a staff retention committee in which they open up lines of communication with frontline staff, healthcare staff, and correctional officers. If the Board is truly concerned about preventing the high number of deaths, and the staff turnover at our jail, then they need to get serious about working

on the staffing problems of our jail.

The survey revealed that many residents are not being serviced. We also need to start preparing for the future of our jail with the need to educate and elicit support from the new administration and warden. This survey will be provided to the Search Committee for a new warden.

Thank you.

JUDGE HOWSIE: Thank you, sir.

I just want to say thank you to Mr. Kenstowicz for your time and energy and effort that you put into these two surveys.

Thank you. I know it was burdensome to undertake those efforts. So thank you.

With that being said, Sister Barbara Finch.

MS. FINCH: Sister Barbara Finch,

F-I-N-C-H.

As stated before, I worked for ten years at the Allegheny County Jail from 2008 until 2018. Special message to Mr. Fitzgerald, if you will. I tried to have conversations multiple times of his first mistake, to remove

Bruce Dixon and Dana Phillips from the Health

Department and inside the jail years ago. I was

hired out of the Health Department.

Second major mistake was him having Corizon run the jail.

Under the Health Department, these are the things that we had. It wasn't perfect, but we were trying to build to make it more perfect. You had Dana Phillips, who was a COO.

Now, she had administration skills. She was not a medical person, but we had a Director of Nurses, we had an Assistant Director of Nurses, we had a Medical Director. Dr. Patterson was probably the best medical director we ever had at Allegheny County Jail. We had an RN that was head of training. We had pharmacy services. We had an RN inside the pharmacy. We had laboratory services. We had some women's services. As much as possible, staff performed duties that they were trained for.

I was hired as a sick call nurse.

Every day that I walked in under the Health

Department, I worked as a sick call nurse. When

Corizon came into being, I was taken off. I was

put into Intake, in the medical housing unit, the

mental health unit, so forth, and so on. We also had a podiatrist that came in.

We had x-ray services. There was an attitude that purveys and still purveys that just because our friends do not take care of themselves on the outside, that we don't have to bother to provide services for them, extend services inside the jail. We are legally and morally responsible for them to do this. It doesn't matter what they do on the outside. As long as they're confined and can't do anything for themselves, we're responsible for it.

Pour nutrition, problem with delivery of meds. There's not enough nurses to deliver all the meds. Morning meds are being delivered in the afternoon. Medically you should deliver meds when they should be given so that they're effective, that they actually treat the conditions that we're medicating for.

We have inconsistency with dealing with addiction protocols, safety issues. I violated a safety issue because I continued to do my sick calls sometimes in my sick call room without an officer standing out because morally, I was responsible for my patients, and I cared

deeply for them that they would get their care.

was no appreciation of staff with -- that they had a personal life or responsibilities. One person, her house was on fire, and she was told if she left the building, she would be fired. So those are some examples.

Violation of solitary confinement.

My last statement, my suggestion more than anything, let's create a committee of JOB and healthcare specialists and try to explore models of delivery of healthcare. Let's work together. That's all we want to do is to work together.

JUDGE HOWSIE: Thank you, ma'am. William Mistick.

MR. MISTICK: William Mistick,
M-I-S-T-I-C-K. Does anybody here think
Orlando Harper should be running our jail?
AUDIENCE: (No.)

MR. MISTICK: The authoritarian way of manning a jail, it just doesn't work. It's -- it's terrible. We need to reach out, like Sister Barb said and others say, for outside help. John Rago, a Professor at Duquesne, is the Executive Director of the Criminal Justice Advisory Board.

He wanted to come in and help. Blocked. We need to bring more drug and alcohol services in for the residents. The Onala Club wanted to partner, give us literature, bring in meetings. Blocked. For what reason? The only people to bring drugs in the jail are dirty officers, and we weed them out.

AUDIENCE: (Applause.)

MR. MISTICK: You know, we need to work closely with the union too and settle all these grievances, these petty grievances. These kids, young people, are working four days a week, 16 hours a day with one uniform. It's ridiculous.

We need to come up with a plan to bring more help in. We need to find places to recruit people, other jails maybe, maybe law enforcement academies, what have you. But we need to improve the morale down there. And it's a sad state of affairs, and nobody seems to care. A couple people care, but nothing ever gets done. Why can't we bring in outside agencies? Why can't we bring in drug and alcohol help? There's volunteers. The therapeutic value of one addict helping another is without parallel. We bring in

people in recovery. Then when people are released from jail, they have someone to call to get on the right track. It's all blocked. It's sad. We have one small drug and alcohol program, and it's not even a 12-step program. 12-step programs have been in existence for many, many years, helped millions and millions of people.

Running a jail isn't reinventing the wheel. There's best practices out there. We're just not doing them. We need to put a panel together of outside people, the union, the JOB, just like Sister Barb said, and create new policies emphasizing keeping people alive, number one. And, you know, the excuse is, well, people that come to jail aren't in the best health. Yeah, but they're our responsibility. It's time to make a change. God willing. The rumor mill is that Orlando will be gone in August or October. It can't come soon enough.

(Audience applause.)

MR. MISTICK: There's some good people in the jail, people over at that other table there. Deputy Beasom, he's a good man, but the authoritarian -- everybody's got a thumb on them. Everything is discipline. Harper told

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1	44 me this isn't the kind of job you retire from.
2	This is the kind of job you get fired from.
3	Absolutely.
4	AUDIENCE MEMBER: What?
5	MR. MISTICK: Absolutely. That's a
6	quote.
7	Good day. Thank you.
8	JUDGE HOWSIE: Robbie Judy Bardack?
9	Robbie Judy Bardack?
10	All right. Alan Guenther? Alan
11	Guenther?
12	Marion Damick.
13	MS. DAMICK: Okay. D-A-M you
14	know how to spell it. Damick. All right. In
15	doing some
16	JUDGE HOWSIE: Hold on. If you
17	could spell it, please. Sorry.
18	MS. DAMICK: D-A-M-I-C-K.
19	JUDGE HOWSIE: Thank you very much.
20	MS. DAMICK: Got it. Okay. In
21	looking through my trying to trying to sort
22	myself, I found something of interest which
23	happens to include or includes one of your
24	members. You may not recognize the person
25	because he never shows up. I am showing you a

1 picture, three pages, same picture, same picture. 2 Right, all the great things that he says he's 3 going to do. You don't feel badly about it. 4 hasn't showed up for any of the other -- when 5 I've been here at meetings when you met 6 downstairs. He didn't -- he showed up for one. 7 So that's one of him. He doesn't do so well. 8 know he had a rep. I don't know what the rep 9 says, but it doesn't matter. The point is what 10 he even promises doesn't -- hasn't come true. 11 promised Allegheny County control is -- these 12 will -- wait -- he is -- in an interview he said 13 establish statewide reviews of the county jail 14 failure. This was in 2023, just last year. 15 Proposed other -- our jail would include medical, 16 corrections, judicial, professional review teams. 17 It should also include one or two former 18 prisoners. Even that's what's here. What else 19 did he say? There's also reports on how many 20 have died here, which is more than other jails --21 or others. That means knowing every prisoner's 22 death -- under county and custody and justice is 23 a national problem. 24 About nearly 1,000 unreported 25 facilities a year, and we are one of the ones who do underreporting. Most prisoners, jail prisoners are pretrial detainees who haven't been convicted of -- is all -- and too poor to be in, ended up. The real problem is indifference and a shocking lack of political will to solve the problem. I quote, the last one, lucky for you -- we already commented on -- in theory, the County Jail Oversight Board should investigate the deaths but bad blood between Board members and jail administration would sabotage the effort. The jail would not cooperate with the Oversight Board, and political grandstanding, along with the usual bickering, would likely hinder under any constructive effort for reform.

So this is what you have from a member of your staff of the Board, whom I don't have to point out, for 50 times does not appear. His -- whatever they call it. He does appear usually, and presumably, before nothing comes from him. You know he won't be here next time, but let's hope the next -- our next director of the County understands what goes on at the county jail and helps to do it instead of making things up in the newspaper.

I thank you.

1	47  JUDGE HOWSIE: Thank you. Thank
2	you.
3	JUDGE HOWSIE: Dean Damick.
4	AUDIENCE MEMBER: No.
5	JUDGE HOWSIE: Okay. Tanisha Long.
6	MS. LONG: I'm a little taller.
7	Before I begin, I would like to pass out
8	something to the Board members if that's okay.
9	JUDGE HOWSIE: (Nodding head).
10	MS. LONG: Yeah? Thanks. Cool.
11	All right. Tanisha Long. I'm
12	ready to start.
13	Recently the Abolitionist Law
14	Center wrote a medical advocacy letter on behalf
15	of Mr. Aaron Tipton, an incarcerated person at
16	the Allegheny County Jail. Mr. Tipton was
17	prescribed Gabapentin for nerve pain when he went
18	into the Allegheny County Jail. This diagnosis
19	was confirmed by jail staff, and Aaron Tipton was
20	removed from that medication for no reason.
21	Aaron Tipton then suffered I
22	don't even want to say suffered. Aaron Tipton
23	then had his arm broken by a correctional officer
24	at the Allegheny County Jail. There are x-rays

included in there. He again needed Gabapentin

25

for nerve pain. Doctors at the jail noted it in his chart that he needed this medication, the jail's own doctors, and he still was not given this medication.

To date, Aaron Tipton has not received the medication he needs. We wrote a letter on his behalf a year ago. No one from the jail has responded despite the fact that the Abolitionist Law Center, some of our lawyers have medical clearances, medical permission clearances.

It makes me wonder why

Warden Harper is set on denying medication that
is not -- it's not an opioid. It's not
addictive. It seems that this is to punish

Aaron, and when we talk about punishment, I don't
want this public comment to end in retaliation
because it has happened before, especially in
regards to Mr. Tipton. This man had his arm
broken by one of Warden Harper's correctional
officers, and the pain he suffers from it today
he cannot properly get treated because
Warden Harper will not allow him to have the
medication he needs. This isn't acceptable.
This is a violation of his civil rights, his

human rights, his constitutional rights, and this can't be the type of jail that we have in Allegheny County, where correctional officers are able to break the arm of a man and then deny him the medication he needs to have pain relief.

There's no reasonable explanation for denying Aaron Tipton Gabapentin. There isn't. And as we heard from the healthcare workers at the Allegheny County Jail, they're not the ones who get to make the choices. They're not the drivers, and that's problematic. No one with a Doctorate in Philosophy should be running your healthcare -- your healthcare services. That's -- I'm sorry. That's laughable.

However, we need people who know what they're doing in place making these decisions, and we need to make sure that people like Aaron Tipton get the medication he needs.

We say this with Denzel Kendrick. We saw this with several other of our ALC clients-ish, not even clients, to be honest, but the Allegheny

County Jail continues to fail to provide adequate medical care to incarcerated people. And I say adequate because that's the minimum. They're not even meeting the minimum, and they are killing

1 people. We have people in this room today who 2 have lost their children to the Allegheny County 3 Jail and Warden Harper's choice to be a doctor. 4 If that's the career you were 5 seeking, Warden Harper, after your termination, 6 hopeful termination, or your retirement, then I 7 suggest you go get a medical degree that would 8 allow you to make the decisions that you are 9 making for the lives of the people in the 10 Allegheny County Jail. Because right now, what 11 you're doing is unacceptable, inhumane, and 12 illegal. 13 And if we're holding incarcerated 14 people to the standard that they not break the 15 law, and we're telling them that their punishment 16 is to be incarcerated, why is Warden Harper a 17 free man? 18 (Audience applause.) 19 MS. LONG: Thank you. 20 JUDGE HOWSIE: Josh Thieler, 21 "Theiler." 22 MR. THIELER: Hello. My name is 23 Josh Thieler. It's spelled T-H-I-E-L-E-R. 24 JUDGE HOWSIE: Thank you. 25 I'm here to speak MR. THEILER:

about the Allegheny County Jail's continued refusal to provide medical care consistent with the needs of the incarcerated community.

Warden Harper has confused his position as a warden with that of a medical doctor, a position we all know he would also fail at.

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Doctors with medical degrees, practices, and years of experience prescribe their patients medications to help them manage their medical conditions. Warden Harper, the man responsible for 19 deaths in the past two years, has decided he is more knowledgeable than a medical doctor. Warden Harper has made it clear that he does not care about the incarcerated people in the Allegheny County Jail. He places people with mental health issues in solitary as punishment. He has a policy of strip-searching Sorry. He attempts to hide deaths at children. This sadistic pattern of behavior is the jail. what we will remember Warden Harper for.

When it comes to Aaron Tipton,
Warden Harper has decided that Aaron does not
need Gabapentin, a non-addictive medication used
to treat nerve pain that Aaron was prescribed
before entering the Allegheny County Jail. After

Warden Harper allowed a member of his staff to break Aaron's arm, he continues to deny him medication to lessen the pain Aaron suffers.

Warden Harper wants to teach Aaron Tipton a lesson. He wants Aaron to suffer because that's how he runs his jail.

He feeds incarcerated people roaches. He ignores sick calls. He lets people suffer from overdose until they die in their cells. That's who he is.

We can't fix Warden Harper. We can only get rid of him and hope he experiences even a fraction of the trauma he has inflicted on the people in the Allegheny County Jail.

The only people who can help Aaron
Tipton right now are sitting in front of us.
We've told you time and time again that the
medical treatment in jail is causing unnecessary
suffering, permanent disfigurement, mental health
issues, and trauma. What is the Jail Oversight
Board going to do to ensure that the Allegheny
County Jail complies with the directive of
Aaron Tipton's doctors? When will we use common
sense and acknowledge that Warden Harper is unfit
to make medical choices? I ask you individually,

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1	will you help Aaron Tipton receive the medicine
2	his doctor prescribes?
3	Judge Howsie, will you help?
4	Judge Lazzara, will you help? Kevin Kraus, will
5	you help? Bethany, I know you will.
6	MS. HALLAM: Oh, I will definitely
7	help. I'm just like, I didn't hear anything from
8	the people you asked previously.
9	MR. THIELER: And that's
10	MS. HALLAM: Okay.
11	MR. THIELER: honestly in line
12	with everything that I think we see. When all of
13	us take time out of our days to come before you
14	and ask that you do something to help our
15	neighbors in that jail.
16	Thanks.
17	JUDGE HOWSIE: Alex Phillips.
18	MR. PHILLIPS: Alex Phillips,
19	P-H-I-L-I-P-S.
20	Hello, Members of the Board. In
21	keeping with the theme today, we're going to be
22	talking about some medical issues at the ACJ.
23	I'm here to talk to you about one person in
24	particular, although it's obviously indicative of
25	a much larger problem that exists at the

Allegheny County Jail. We talked about Aaron Tipton, who you just received the letter of medical advocacy from the Abolitionist Law Center. It just wrote about him.

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Mr. Tipton suffers from both physical and mental disabilities that he sustained in an injury in 2010 and had to take medication for the pain. He is prescribed Gabapentin, which is not an opioid, and it's not addictive. He had been prescribed this medication by his doctor and remained on it until he was incarcerated in 2017. It should go without saying that he still needs this medication. Going to jail doesn't change medical conditions, but at some point, someone in the ACJ determined that he didn't need it anymore and took him off that Gabapentin. They gave a bunch of different reasons why, but in the end, it doesn't really matter. A man is suffering because of the horrible decisions and the horrible leadership there.

This isn't justice enough, but, you know, it's Allegheny County Jail, so of course, everything has to be worse than it possibly could be.

Last September, he was assaulted by a correctional officer and suffered a spiral fracture in his arm as a result. A spiral fracture means that, at most, charitably, this correctional officer knew that he very likely could have broken Mr. Tipton's arm. This is a man who already suffers from chronic pain, and that is then exacerbated by being assaulted in the place that's supposed to take care of him.

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The doctor then -- he saw the doctor, obviously, and he was once again prescribed Gabapentin, and once again, he is taken off of this. This is already -- I mean, in the letter you have, this is already illegal. There is plenty of casework that shows that this is illegal, and there is plenty of room for legal action to be taken against the Allegheny County Jail, but that's not my question. It's pretty much determined that this is illegal. This is a moral matter, and I'm sorry, but how is this acceptable? This man was already suffering before he was put in your care, and then you exacerbate that suffering. And then on top of that, you take away his only means of alleviating that suffering that is not an opioid, and it's

not addictive. I understand you don't want those there, but why are you taking this away from this man? This is the only way to alleviate that?

We already know the conditions in the ACJ are pretty much hell. So I really am just -- like, what about this is going to make sure that Mr. Tipton doesn't offend again? What about this is making him a better citizen? And what about this is rehabilitative, which is, you know, the actual reason that we, you know, supposedly put people in jail?

I'm disgusted, and I really hope that, Warden Harper, that -- you better hope that this is the most justice that you'll ever see because I guarantee you if you saw any real justice, you'll be facing far worse than anything you've put people through in Allegheny County Jail.

Thank you.

JUDGE HOWSIE: Thank you.

Sam Lew.

MS. LEW: I'm not as tall. Hello, my name is Sam, and I am here to remind the Jail Oversight Board and the Jail Administration that Allegheny County voters passed a legally binding

referendum banning solitary confinement in the jail. Each month the jail releases a legally mandated segregated housing support and lists why people are placed in solitary confinement. The report for June is available. The jail states that three individuals were not given their legally required out-of-cell time because one had court, one was being transferred to restricted housing, and one was denied time due to behavioral issues. None of these are legally allowed reasons for the jail to deny an incarcerated person their right to time out of their cell.

Warden Harper knows that solitary confinement cannot be used as punishment, and his decision to violate the law due to unspecified behavioral issues is a crime. Nowhere in the referendum does it give the warden the power to decide when the referendum makes sense and when he should follow it. This is a clear and inarguable violation of the law, and the warden is flaunting his ability to violate it because he knows that no one is doing anything to prevent him from doing so. He does not fear accountability because the Board had failed to

enforce the referendum.

On the report, the jail lists full facility lockdowns for every weekend in June.

I'm not sure how the Board is so comfortable with letting Warden Harper use solitary confinement to solve his staffing issues. Human and civil rights do not take breaks on the weekends, even if judges do. Every member of this Board has access to the Segregated Housing Report and can pinpoint the clear violations of this referendum. Then jail is not even pretending to follow the law anymore. They are boldly telling you that they refuse to do so.

No matter your thoughts about the referendum, you do not have the right to violate it. When we addressed the solitary confinement of individuals with mental health issues, a Board member defended the practice. You don't get to defend the jail's decision to break the law. It is deeply hypocritical to incarcerated people for allegedly breaking the law but then defend their jailers when they do the same. We are demanding that members of the Jail Oversight Board do their job and respect voters' choice by enforcing the ban on solitary confinement because now you are

59 1 complicit in continuing the civil and human rights violations of the people incarcerated at 2 3 the Allegheny County Jail. 4 Thank you. 5 (Audience applause.) 6 JUDGE HOWSIE: Brian Englert. 7 And that last name was Lew, L-E-W 8 for anyone who didn't have it. 9 MR. ENGLERT: My name is Brian 10 Englert, E-N-G-L-E-R-T. I represent the 11 Correction Officers Union. I actually was 12 prepared to help John today. I didn't have 13 anything prepared, but I'll wing it. 14 We'll do the good, the bad, and the 15 ugly. The good is Officer Jack Feese, who was 16 retired in 2017. He won his case at the State 17 Supreme Court, and the jail owes him roughly 18 \$13,360. You have 14 days to pay. It's at 19 6 percent interest. I'd like to see a check 20 mailed to his house Deputy Warden Toma. I mean, 21 he's been gone for five years now. Can we get 22 him his money before he dies? 23 Also good, food service. The new 24 food service vendor, everybody seems to like it. 25 The inmates are pleased. The food is good.

haven't heard one complaint.

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Also, Laura Williams, a person I never thought in a million years I would say anything good about -- this is the same woman who told me I'm a horrible parent -- I watched her Prison Board Meeting, and I think she learned how to be a warden by working here because she does exactly the opposite of what she did in front of all of you. She answers questions. She brings required reports, and she holds people accountable, all things here that she ran out the clock on all of you on. She talked and talked and talked until her time was up. She does the exact opposite there, so she learned how to be a warden by being a deputy warden here, in a better way.

Also, as a President of the Union, myself and two other officers stopped the resignation of a newer officer. She had been forced 20 out of her last 23 days worked. All those overtimes were 8 hours except for one. We talked her out of it. She's a good officer. We encouraged her to stick with it. But the overtime for this new group is every single day. So nine officers getting forced every single day.

Scheduling is only supposed to be five consecutive days. The crack scheduling team that the jail uses has scheduled some of these officers six and seven consecutive days in a row.

Now the bad, Level 5 all page. For one year, I have been writing to this entire
Board all the way up to Rich Fitzgerald, who doesn't care about anything, that the Level 5 All Page is broken. So you can't hear over the speakers on Level 5 or 5-M, and the control booth can't come over the panel if there's an emergency. No answer from anybody for a year. Does somebody have to die again for this to become a bigger issue? It's, we have a service contract. Get them out there to fix it. The end. This is not hard. This is basic blocking and tackling.

There's a Job Fair. That's great, but it's really bad. It's in front of the jail. It's in front of the jail. If they wanted to work at the jail, they would have already applied. We now have a residency restriction that's lifted. Why are we not going to other counties and talking about how much we pay to get you to work there? Having a Job Fair -- that's

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1	like having a car wash in front of a car wash.
2	It makes no sense.
3	And the ugly, the complaints in
4	medical mirror the officer complaints from the
5	same survey. The officers say that
6	administration is inept and does not listen to us
7	about our concerns. The medical survey mirrors
8	that, and that's kind of terrible. You have
9	somebody in charge of medical that's not
10	qualified. That's like having a mechanic do your
11	taxes. What sense does this make?
12	JUDGE HOWSIE: Thank you, sir.
13	MR. ENGLERT: As officers, we deal
14	with the frustrations the inmates face. I have
15	an inmate that had a chipped tooth, and I called
16	the medical
17	JUDGE HOWSIE: Mr. Englert.
18	MR. ENGLERT: This is very
19	important.
20	JUDGE HOWSIE: This is past your
21	time.
22	MR. ENGLERT: Well, you can have me
23	removed. I called to get him a sick call, and
24	they said we'll put in a sick call.
25	JUDGE HOWSIE: Mr. Englert.

63 1 There were 1,419 sick MR. ENGLERT: 2 calls in front of him since April. What sense 3 does that make? 4 JUDGE HOWSIE: Thank you. 5 Sharon Bonavoglia -- Bonavoglia, 6 sorry. 7 (Audience applause.) 8 MS. BONAVOGLIA: Sharon Bonavoglia, 9 B-O-N-A-V-O-G-L-I-A. This is the first that I'm 10 hearing about Aaron Tipton, who I will remind all 11 of us here is our neighbor, and I am desperately 12 praying that he -- nor anybody else is added to 13 this list. 14 We at PIIN would like to 15 respectfully insist that this Board take action 16 on the correctional officer survey and the 17 healthcare worker survey presented tonight and at 18 last month's meeting. It is quite clear that 19 employees at the Allegheny County Jail have much 20 to say to offer this Board and the administration 21 at the jail that would help with retention of 22 staff. 23 Also, we would like to shine a 24 light, a spotlight on the need for exit 25 interviews with any and all staff that leave

their positions anywhere in the Allegheny County Jail. Clearly, at the jail, as well as places like the Renewal Center, action on these surveys is life and death for anyone incarcerated under your care and oversight.

It is hard to find the patience with this Board and especially this administration, for which I will tell you sitting directly behind Warden Harper when Josh -- I don't know where he is -- when he was speaking, just when he was done speaking, there was something really amusing for Warden Harper. I'm not sure what it was, but he did share it with our Doctor of Philosophy, which I thought was pretty reprehensible, considering what the discussion was.

It is hard to find the patience with this Board and especially this administration, but I do hold on to the hope that the strength of your convictions, to uphold your mandate to care for those incarcerated in Allegheny County Jail, will give you the courage to act on these surveys.

And now, if you are physically able, please rise out of respect for the reading

of the names of the dead. I would personally
invite the administration for the jail itself to
rise. It's the least you could do.
Richard Lenhart, Robert Blake,

Cody Still, Daniel Pastorek, John Brady,
Martin Bucek, Robert Harper, Vinckley Harris,
Justin Brady, Paul Allen, Roger Millspaugh,
Paul Spisak, Gerald Thomas, Jerry Lee Ross, Jr.,
Victor Joseph Zilinek, Ronald Andrus,
Anthony Talotta, William Spencer, James
Washington, Damon Leroy Kayes, and Tim Manino.

JUDGE HOWSIE: Thank you. Tim
Stevens.

MR. STEVENS: Good afternoon. I'm urging --

JUDGE HOWSIE: Your name, please.

MR. STEVENS: Tim Stevens, Chairman

of Black Political Empowerment Project, BPEP.

I'm urging that your entire Board agree to identify a time, date, place with sufficient time, preferably several hours, to fully review all the documents that were e-mailed to each of you today, or yesterday, July 5th, as well as any other documents that may have been shared with you over the past few months, and may

be shared with you today, all of which are aimed at identifying the various problems at the Allegheny County Jail, as well as possible solutions.

I'm also requesting that such an announcement be made at this afternoon's JOB meeting. The public has been pleading with you for months and requests that serious attention be given to the many issues and concerns that have been raised with regard to the conditions at the Allegheny County Jail. More importantly, the inmates who are housed at the Allegheny County Jail deserve this level of attention.

We've provided to each of you the following, the February 21, 2023, 19 Ways to Fix the Jail; the November 22, 2022, letter from the Black Political Empowerment Project to County Exec Rich Fitzgerald requesting a meeting with various community groups to share their concerns; the October 18, 2022, letter to County Executive Fitzgerald, Warden Harper, and the entire Jail Oversight Board requesting a review of the October 13, 2022, letter to BPEP from the mother of inmate Aaron Tipton.

The October 1, 2022, BPEP position

paper entitled An Open Letter Outlining Dangerous Conditions, A Plan for Action for the Allegheny County Jail; the March 2022 Pittsburgh Institute for Nonprofit Journalism article by Brittany Hailer, How Hard is it for Families to Get Information; the March 13, 2022, article by Brittany Hailer of the Pittsburgh Institute for Nonprofit Journalism entitled 13 Men Died After Going to the Allegheny County Jail; the September 16, 2021, press conference announcement to cancel the no-bid contract with Senior Team Leader Joseph Garcia and his company, Corrections Special Application Unit; the fall 2021 University of Pittsburgh School of Social Work survey responses from individuals who were incarcerated.

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In addition, BPEP also attached the new results analysis of the ACJ Healthcare Job Satisfaction Survey 2023 initiated by PIIN, which we found quite troubling and absolutely deserving of your collective attention.

It's beyond time to act. And I respectfully and courageously ask that this Oversight Board do so.

Thank you for your attention. I

	68
hope you'll make that commitment collectively	00
today. I know some of you are willing to do so,	
including one who is not present today.	
Thank you.	
(Audience applause.)	
JUDGE HOWSIE: Roy Blankenship.	
If you can state your name and	
spell your last name, it will be helpful.	
MR. BLANKENSHIP: My name is Roy	
Blankenship, and that's R-O-Y	
B-L-A-N-K-E-N-S-H-I-P, J-R, Junior.	
JUDGE HOWSIE: Thank you.	
MR. BLANKENSHIP: First, I had a	
lot I wanted to say, but my fellow advocates in	
the room, they brought a lot of information to	
this Board. They presented a lot of viable	
things as far as what's happening at that jail.	
The last time I was here, I spoke,	
and I also, as one of the other advocates did, I	
invocated (sic) that it was your duty, it's your	
right constitutionally to stand by these	
residents these of our county that are in	
that jail, especially the ones that haven't been	
convicted.	
As we see, atrocities are still	
	today. I know some of you are willing to do so, including one who is not present today.  Thank you.  (Audience applause.)  JUDGE HOWSIE: Roy Blankenship.  If you can state your name and spell your last name, it will be helpful.  MR. BLANKENSHIP: My name is Roy Blankenship, and that's R-O-Y  B-L-A-N-K-E-N-S-H-I-P, J-R, Junior.  JUDGE HOWSIE: Thank you.  MR. BLANKENSHIP: First, I had a lot I wanted to say, but my fellow advocates in the room, they brought a lot of information to this Board. They presented a lot of viable things as far as what's happening at that jail.  The last time I was here, I spoke, and I also, as one of the other advocates did, I invocated (sic) that it was your duty, it's your right constitutionally to stand by these residents these of our county that are in that jail, especially the ones that haven't been convicted.

going. It's been about four months. I'm not saying that the Board's not moving or doing anything, as Tim said, and I know many of you joined the Board to be able to do something to serve your community, but some others may just feel like it's a feather in their cap.

A human should not end up with -as a piece of cardboard that people are having to
go stand in courtyards or in lobbies to say this
is actually a person. This is a human life, you
know? And their children, whoever, their mothers
and fathers, this is what the end of their life
is because of a lack of accountability on those
who are supposed to oversee.

The Warden, as Mr. Mistick just mentioned, may be gone. He may still be here, but we do have the power, and I'm talking to all the residents and everyone in Allegheny County, that November is coming. Use your power to vote, because the next executive that sits in that seat will be someone who will take care of getting rid of anyone that's not serving the purpose of the people.

And I understand Mr. Mistick would probably make a great warden, but the staff at

1 the jail -- and I see that you guys need to look at this troubling issue. You have a fracturing 2 3 of the whole jail system from the Warden who 4 doesn't work with his staff. I mean, that should 5 be alarming enough as you guys being the 6 oversight. If you don't have your parts and 7 pieces working together, that's not a team. 8 no matter what the purpose of that team, just 9 like the Board not working together, nothing is 10 going to get done. Mom says she wants to see 11 something done before she goes. 12 So I implore the Board, please, 13 stop letting our residents end up on cardboard. 14 Thank you. 15 JUDGE HOWSIE: Will Parker. 16 MR. PARKER: Hello, everyone. 17 name is William Parker, W-I-L-L P-A-R-K-E-R. 18 First, like always, I like to lead 19 with respect, so I'm here to talk first with --20 directly to Bethany Hallam and ask for an 21 apology. 22 MS. HALLAM: For what, sir? 23 MR. PARKER: You don't know what I 24 will be asking for an apology for? 25 MS. HALLAM: I do not.

MR. PARKER: So like I explained, I lead with respect before I go in. So I want you all to know on Juneteenth, on June 17th, I was arrested for protesting against the City's mayor. All of us have a right to express ourselves in ways that we want to. That's our freedom of speech. Everybody in here is doing the same thing that I did out there on that day, but Bethany Hallam took it upon herself to get next to me and purposely bump me multiple times intentionally. Does that ring a bell, Bethany?

MS. HALLAM: It does not.

MR. PARKER: Okay. I bet it
doesn't, but this is what we deal with. We have
these people who sit up here on this stage and
want to acknowledge other wrongdoing but don't
want to acknowledge their own. Okay, because of
her wrongdoing, I was arrested. I was charged
with a felony aggravated assault and multiple
disorderly conducts. I was actually scheduled to
have a preliminary hearing today, but those
charges were withdrawn thanks to the grace of
God. See, God didn't want me to go down there to
hold court. He wanted me to come right here and
hold court with you in the big house and hold you

accountable, because I don't know if you were I don't know if you were on drugs, but I'm here to ask you to never butt in -- in this case, bump in the business that a black man has with another black man, okay? I don't know how you feel. You get up here, and you do your little snarky bit, and you feel comfortable around your little groupies and imposters, but I'm not having that. You can't do that. Because of your actions, it led to my incarceration on a day that we're supposed to be celebrating freedom. I was incarcerated, and then you walked down the street and took pictures with these political, elected officials and then placed a demon emoji under their pictures. Does that ring a bell?

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MS. HALLAM: No, it does not.

MR. PARKER: I bet it doesn't. And this is why I won't allow her to come and continue to hold people like Elliot Howsie accountable without holding yourself accountable. I will not allow you to hold Warden Harper accountable without holding yourself accountable because right now, I'm looking at you as a jail reform fraud. What are you trying to do? Make

sure people get a pillow after you send them down there. Is that what you're trying to do? That's because it's not right. And you should be the first one to apologize. We all have the right to express ourself and that shouldn't be taken away from anybody.

Secondly, everybody likes to come down here and ridicule these people. And I'm not giving nobody up here no pass, but they're doing a difficult job. What are you doing when you leave here? Are you shopping black?

AUDIENCE MEMBER: I can tell you -
MR. PARKER: Hold up, hold up, hold

up. I didn't speak when you were speaking. Hold

up. I did not speak.

AUDIENCE MEMBER: Get him out.

MR. PARKER: Listen, that's right.

DEPUTY: Listen, it's his time,

period.

MR. PARKER: That's right. Now listen, what do you do when you leave here? Are you going to shop black? Are you going to prevent these people from going down there to the Allegheny County Jail, because it seems like a lot of people like to cry once they're already in

there, but what are you doing to prevent them from going there in the first place? Are you shopping black? Are you supporting black-owned businesses, because that's who's down there at the Allegheny County Jail, black men and women, overpopulating. Y'all not holding up your end of the bargain.

Back to you, Bethany, respectfully.
JUDGE HOWSIE: Thank you,

Mr. Parker.

Brad Korinski.

MR. KORINSKI: Brad Korinski,

K-O-R-I-N-S-K-I, with \$10,000 earning interest in
the bank. I think the only person that doesn't
want Mr. Fitzgerald to come to the Jail Board
meeting is my wife. She says he better not show
up. But how ironic that in a week where

Mr. Fitzgerald goes to court to prevent minimum
wage to be raised to the most vulnerable of our
county employees, he'll go to court for that, but
he won't show up here for the most vulnerable
people in Allegheny County at the jail. And why
is that important? Because everything that we
say about Warden Harper, everything that John K.
and others have painstakingly put together and

read -- I mean, what an act of citizenship that was.

(Audience applause.)

MR. KORINSKI: And this Board should put in a proportionate amount of effort to fix the problems identified in that report as was put into the construction and the presentation of that report. But everything said about Warden Harper could be fixed by the man in the corner office who does nothing.

And Philosophy has had kind of a bad inning at this meeting, so I'm here to speak on behalf of philosophy. Maybe it holds a solution, and that's called Occam's razor, which is often the simplest explanation is the best, and this Board should employ Occam's razor to fix the problems of John K.'s report. Get a committee and call upon the licensed professionals in the jail. Get answers from those persons who hold a license and who will tell you what is actually happening and then set forth a plan of action to correct it. This Board should not be satisfied without medically licensed individuals making the medical calls. It's been a problem year after year after year,

and this Board should stop it with a vote.

Lastly, you're going to vote on the liaison position. The liaison position is a good idea. Please vote on the Memorandum of Understanding that sets forth what the liaison's duties and responsibilities are, and as well, what the office in which the liaison is being housed will do with the liaison. Don't trust the liaison to the Sheriff's Office.

Thank you.

JUDGE HOWSIE: Thank you.

Rachel Radke.

MS. RADKE: Sorry. Lost my place.

Okay. Rachel Radke, R-A-D-K-E.

JUDGE HOWSIE: Thank you.

MS. RADKE: So in my real life outside of the Gold Room, I am a mathematician.

So as a result, I tend to look at data everywhere. I presented a lot of data to this Board over the course of this year because data is really the most objective and one of the most

22 effective ways that we can inform policy and

evaluate the ways we enact that policy.

So each week when we come into this meeting, we get this packet, right? It's got

like a lot of data in it, but it's missing some really important data. And I want to talk about the piece of data that would tell us how many overdoses happened in the jail during this month, because we know a lot. Like we know how many Jewish people are in the jail. We know how many people went to an NA meeting, but we're not finding out how many people overdose on fentanyl, and that seems wrong to me.

So -- I'm sorry, I lost my place.

The Jail Oversight Board in Bucks County, PA,
acted upon this very issue after they had their
sixth in-house overdose. The Jail Oversight

Board in Bucks adopted a Motion requiring the
jail to notify the Board of all overdoses, fatal
or not. Without tracking this piece of data from
month to month, how will we ever know the true
state of things inside the jail? How can we
evaluate the need of the people in the jail? How
can we evaluate the effectiveness of any
interventions? This is a no-brainer. We need
this number.

Along the same lines, the Delaware County Jail Oversight Board took action to address the overdose crisis in their facility.

They adopted a resolution calling for the expansion of MOUD at the jail to include both continuation and induction and for the jail to do so on a reasonable timeline.

Now, according to the PA State

Legislature, this Jail Oversight Board is acting
under the same statute as those Jail Oversight

Boards. They're responsible for the oversight of
the health and safekeeping of inmates, and so I'm
calling on this Board today to take two simple
actions. One, put forth a motion requiring the
jail to document and provide the number of drug
overdoses that occur within their population each
month beginning today. We know they have the
number. It can't be a secret. We need to have
it.

Two, put forth a resolution calling for the expansion of MOUD at the ACJ and instituting a reasonable timeline for it to happen.

Thank you.

JUDGE HOWSIE: Thank you.

(Audience applause.)

JUDGE HOWSIE: Hopefully, everyone had an opportunity to review the minutes from the

last meeting.

MS. HALLAM: Judge Howsie, before we move on, I think this is the most appropriate place to do this, but as you know, I serve as President Pat Catena's designee on this Board, and since I am here as a designee, he asked if I could read a statement from him before the end of Public Comments.

JUDGE HOWSIE: (Nodding head.)

MS. HALLAM: Thank you. So

President Catena is the President of County

Council. He had intended on giving this letter

to the County Executive would he be here today,

but, you know, he wasn't. So I just would like

to read it for him.

"I believe that all of us at this
point are keenly aware of significant issues at
the Allegheny County Jail. According to
information recently made available to all of us,
correction officers employed at the Allegheny
County Jail reported a variety of disturbing
trends in their responses to a survey. Over
90 percent of the respondents of the survey
expressed disagreement with the statement that
they feel valued and respected as a member of the

ACJ staff, and over 59 percent of the respondents expressed this as a statement with which they strongly disagree. 92 percent indicated that they have increased concerns about their personal safety while at work. 100 percent indicated that the ACJ is not adequately staffed with correction officers. Over 76 percent indicated that they are asked to perform work outside of their job descriptions, and almost 72 percent indicated that they do not feel they have been adequately trained to perform all of the tasks that they are required to undertake. About 93 percent indicated that forced overtime has disrupted their lives and nearly 90 percent indicated that it has worsened their physical and/or mental Almost 90 percent indicated that ACJ health. management does not understand the challenges correction officers face in their jobs, and over 90 percent indicated that management is not receptive to their feedback or suggestions.

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Similarly dire options -- sorry,
similarly dire opinions were expressed in the
survey of healthcare workers at the ACJ, but I
want to highlight a couple of results. Well over
90 percent of respondents indicated that morale

is a major problem among staff. Over 80 percent said that they are unable to complete all of their tasks while providing quality healthcare.

Almost 97 percent indicated that the ACJ's healthcare administrator is unqualified to make medical decisions about patient healthcare.

100 percent indicated that there are not enough healthcare employees to fill all shifts.

This data is not theoretical. It comes from real individuals who are in the Allegheny County Jail daily. It is simply impossible to see this information as anything other than a damning indictment of the working environment at the Allegheny County Jail, and is a clear warning to all of us. The picture it paints is of a caustic, toxic workplace in which inadequate numbers of staff are forced to perform to the point of exhaustion tasks for which they were not trained and in which supervisory staff is unresponsive, unqualified, or both.

This impression is largely borne out by anecdotal evidence from the ACPEIU Safety Reports, which are replete with examples of inadequate staffing and its harmful effects upon both ACJ employees and the residents.

example, this report indicates that there were no medical and/or mental health professionals present in Intake. The June report is 11 pages long, and essentially all of it details specific examples of problematic consequences of inadequate staffing levels.

This situation is unacceptable. We owe our employees a safe working environment, staffed at adequate levels to meet the needs of the facility. In this context, employee retention is just as vital as hiring, and a clear plan for addressing the obvious concerns of existing ACJ employees must be created.

We also have a duty to the individuals incarcerated at the Allegheny County Jail, for if the goal of the criminal justice system is rehabilitation, we must ensure that individuals' mental and physical health needs are adequately addressed and that the environment at the ACJ is not so devoid of supervision that it essentially requires the individuals conduct more criminal activities merely in an effort to keep themselves safe.

I no longer care about assigning

blame. The shortcomings at the ACJ over the last decade are too many to recite, and the tangible impacts of understaffing due to those shortcomings have reached a level at which they simply must be addressed. Too many people have died in the County's custody already, and too many people are not receiving the services they require to even begin contemplating effective rehabilitation.

Platitudes and partial truths designed to deflect blame are useless wastes of time and effort, and whatever is necessary to remedy the staffing deficiency must be done immediately.

Accordingly, I have charged Ms.

Hallam, my representative on this Body, to

prioritize staff hiring and retention efforts in

her activities. I strongly urge the Board to do

the same and fervently hope that by working

together, we can avoid possible outcomes like the

Council conducting an investigation or holding

public hearings regarding the Allegheny County

Jail. Sincerely, Patrick J. Catena, President of

Council."

Thank you.

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1	JUDGE HOWSIE: Thank you.
2	With that being said, I hope
3	everyone had an opportunity to review the minutes
4	from the May 18th meeting and the June 8th
5	meeting.
6	Is there a Motion?
7	JUDGE LAZZARA: So moved.
8	JUDGE HOWSIE: Is there a second?
9	MR. KRAUS: Second.
10	JUDGE HOWSIE: Anyone opposed?
11	(No response.)
12	JUDGE HOWSIE: All in favor?
13	(Chorus of ayes.)
14	JUDGE HOWSIE: All right. The
15	Motion carries. The minutes will be approved.
16	OLD BUSINESS
17	JUDGE HOWSIE: Old Business, Judge
18	Lazzara.
19	JUDGE LAZZARA: All right. So what
20	we are trying to do is have the Jail Liaison
21	position start. We think it will be incredibly
22	helpful to the fact-finding mission of this Board
23	to find out exactly what goes on in the jail.
24	The Incarcerated Individual Welfare
25	Subcommittee was tasked with finding the jail

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1	liaison and making a recommendation to this
2	Board. We've done that. We've looked through an
3	awful lot of resumes. We conducted interviews.
4	We had votes amongst ourselves, and the
5	Incarcerated Individual Welfare Subcommittee is
6	now making a recommendation for the hiring of
7	Ms. Karen Duffola, D-U-F-F-O-L-A, to be the Jail
8	Oversight Board liaison.
9	So at this point in time, I would
10	make that Motion that this Board accept the IIWF
11	Subcommittee recommendation and that we undertake
12	the hiring of Ms. Duffola. I mispronounce her
13	name all the time. I'm sorry.
14	JUDGE HOWSIE: Is there a second?
15	MR. KRAUS: I second.
16	JUDGE HOWSIE: Is there any
17	discussion?
18	MS. HALLAM: Yes, Judge Howsie.
19	JUDGE HOWSIE: Okay.
20	MS. HALLAM: Yeah, I'm trying to
21	think of where to start. Okay. So I do have a
22	couple of questions because I still do not think
23	that without an MOU that this is made clear what
24	this arrangement looks like.

So I guess my question, first, does

25

1 this liaison serve at the will of the Sheriff or
2 at the will of this Board?

MR. KRAUS: The Board.

MS. HALLAM: The Board as a whole. So if any member decides that the person is not fulfilling their job requirements, then an individual member could Motion, and there would be a vote?

JUDGE LAZZARA: A vote for what?

MS. HALLAM: To remove the person as the liaison.

JUDGE LAZZARA: I would think that we would first want to have a discussion about whether they're doing that and -- but this person is only being housed in the Sheriff's Department because there needs to be a place that payroll can be done. And we've been through that a million times. I mean, this is not, you know -- I'm sorry, Sheriff Kraus' -- you know, going to be the one managing. He is there to make sure that this person is housed and that they are doing their job.

But the Board, this person is employed by the Board.

MS. HALLAM: Okay. And is there a

reason to hire this person now before any kind of agreement has been drafted upon what the actual job will look like?

JUDGE LAZZARA: There is a job description that has been out there for quite a long time that we've all agreed on, that we all voted on in our subcommittee, that has the duties and responsibilities of this person. You know, if we decide as a Board that we would like to have something more, you know, detailed, we can certainly do that. But at this point, we have been trying to hire this position since COVID.

JUDGE HOWSIE: Before COVID.

before COVID. And so this is something that we need. We would like to be able to have the facts from the jail. We hear things all the time from both sides. It would be nice to have a pair of eyes and ears in the jail to be able to tell us what's going on, and it's been far too long. So we would like to get this person onboard, and then we can work on the Memorandum of Understanding after that point. But we have the job description at this point in time. Everybody agreed on it.

MS. HALLAM: Yes. I'm not

specifically referencing the job description as much as how the position exists. Again, I have questions about who they report to. Can individual members tell the liaison to do something? Are they responsible for the information that they collect to be given to every member of the Board, or are there able to be confidential conversations between the liaison and one member of the Board? You know, I think that there's a lot of questions about how the actual position works.

And remember, you say that we've had a lot of conversations about this, but the public has not been privy to any of those conversations whatsoever because all of this was done outside of public meetings.

JUDGE LAZZARA: Right. At this point we have a job description, we have recommendation of a person, and let's get the person onboard. This person still has to give notice. There is still time that we can talk about the Memorandum of Understanding, but at this point, let's get the process rolling. It's been far too long.

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1	MS. HALLAM: Okay. And so
2	specifically about you said that there was a
3	vote prior to this coming to fruition here today.
4	Who voted and had their votes cast in the
5	decision to pick this liaison?
6	JUDGE LAZZARA: There was a
7	recommendation made by the IIWF Subcommittee.
8	This entire Board was notified of that, and the
9	recommendation was to hire Ms. Duffola.
10	MS. HALLAM: Yes, Judge Lazzara.
11	I'm sorry. My question was specifically, who
12	voted in that process?
13	JUDGE LAZZARA: The IIWF
14	Subcommittee members.
15	MS. HALLAM: Okay. And who are the
16	members of the IIWF Subcommittee?
17	JUDGE LAZZARA: Ms. Hallam, you're
18	quite familiar with who are the members of that
19	subcommittee. It is you. It is Terri Klein. It
20	is me. It is the Sheriff. It is a
21	representative from the I'm sorry. I'm
22	missing words Mr. Fitzgerald's office and it
23	is a rep it is also Mr. O'Connor.
24	MS. HALLAM: So Mr. O'Connor's vote
25	was cast in the vote to recommend?

1 JUDGE LAZZARA: He did not vote. 2 He was unavailable at that point in time, and he 3 indicated that the vote could proceed without 4 him. 5 MS. HALLAM: Okay. And then you said a representative's vote was counted; is that 6 7 correct? Can you clarify who that is? 8 JUDGE LAZZARA: It was absolutely 9 It was Mr. Pilarski who has voted in all 10 of the other ones and whose predecessor also 11 voted in all of the other meetings in terms of 12 even the creation of this position. There's 13 always been a representative, and a person has 14 always had the ability to vote. 15 MS. HALLAM: And you are saying 16 that you believe it is not contradictory to the 17 State statute that that person was allowed? 18 JUDGE LAZZARA: I am not making 19 legal rulings at this point, Ms. Hallam. 20 simply indicating that that has always been the 21 precedent of this subcommittee that that person 22 voted and that that vote was counted. 23 MS. HALLAM: Can you reference 24 other votes that that person took? 25 JUDGE HOWSIE: Ms. Hallam, everyone

1 was present with the committee. Everyone had a role to play in the interviews. Everyone had an 2 3 opportunity to vet each candidate at the end of 4 that process, which you participated in. 5 MS. HALLAM: Correct. 6 JUDGE HOWSIE: A name was selected. 7 That name is being presented to the Board. So at 8 this point in time --9 MS. HALLAM: Excuse me, 10 Judge Howsie. I want to clarify something 11 because I'm specifically raising an issue with 12 the way that the vote that led to this vote today 13 happened, because I believe that it was in direct 14 violation of a State statute. I believe that it 15 was done in violation of the Sunshine Act. 16 JUDGE HOWSIE: Right. 17 MS. HALLAM: I believe that there 18 were lots of issues for how it came to be, so I'd 19 like those issues that are currently in front of 20 the courts to be resolved before we proceed with 21 something that I believe violates the law. 22 JUDGE LAZZARA: This is not a 23 discovery deposition. 24 JUDGE HOWSIE: It's not. 25 MS. HALLAM: I did not allege that

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1	it was. I'm just saying we are being sued as a
2	result of this vote. Should we maybe not try to
3	rush it through?
4	JUDGE HOWSIE: We're not rushing
5	it. It's been like four years.
6	With that being said, anyone else
7	have any comments they'd like to make?
8	(No response.)
9	JUDGE HOWSIE: All right. With
10	that being said
11	MR. HERBINKO: Actually, yes.
12	JUDGE HOWSIE: Mr. Herbinko.
13	MR. HERBINKO: As a non-voting
14	designee of Controller, we will be abstaining
15	from this because we have significant concerns
16	over the lack of discussion of the MOU. We feel
17	that that needs to be in place before we could go
18	any further with this.
19	JUDGE HOWSIE: Thank you.
20	All right. With that being said,
21	is there we've had a Motion that's been
22	properly seconded. All in favor.
23	(Chorus of ayes.)
24	JUDGE HOWSIE: Any opposed?
25	MS. HALLAM: Can I call for a roll

		93
1	call vote, please?	
2	JUDGE HOWSIE: Sure.	
3	Mr. Abass Kamara?	
4	MR. KAMARA: Aye.	
5	JUDGE HOWSIE: Mr. Herbinko	
6	indicated he is abstaining.	
7	Ms. Liptak, abstaining.	
8	JUDGE LAZZARA: Aye.	
9	MR. KRAUS: Aye.	
10	MS. MOSS: Aye.	
11	MS. HALLAM: No.	
12	JUDGE HOWSIE: All right. So with	
13	that, the ayes carry the vote. Ms. Duffola is	
14	going to be hired as the liaison position.	
15	Judge Lazzara, do you have a report	
16	regarding the IIWF Subcommittee?	
17	JUDGE LAZZARA: That was the main	
18	business of the IIWF Subcommittee. We have not	
19	met since that point in time other than Ms. Klein	
20	and I, and a representative of Mr. O'Connor's	
21	office did meet with the members of PIIN. We had	
22	what I felt was a very great conversation with	
23	the folks, and we are hoping to continue the	
24	dialog with them. I know they wanted to meet in	

July -- or in June, and I'm sorry that simply

25

wasn't about to happen given my schedule, but we are planning on having additional meetings because we think that there can be some benefit from them offering some advice and assistance for things at the jail, and for us also to explain where things are coming from. So I really thought that it was a very productive meeting, and I'm very glad the members, some of whom spoke tonight, took the time to meet with us and that we had at least a portion of our subcommittee that was available to meet. So that's the last thing that we've done in the subcommittee.

I also have the report on the jail population, and I was able to provide -
Ms. Hallam, I wasn't sure whether we'd be able to have it for July, but we were able to get all of the information that also relates to the Behavioral Assessment Unit.

So the status of the jail

population as of 4:30 p.m. on July 4, 2023, was

as follows: There are 1,488 people in the

Allegheny County Jail and 126 people in

alternative housing. This excludes any people

with holds by the Federal Government. Some

people can be held in the jail for multiple

reasons, which could include probation and parole detainers, other county holds, or sentences.

6 percent, that is 88 of the people in the jail itself, are serving a county sentence as a result of a new conviction. 22 percent, that is 28 of 126 people in alternative housing, are serving a county sentence.

22 percent of the people in the jail itself, that is 327 people have a hold from an external jurisdiction, including other counties or for the State. No individuals in alternative housing have a hold from any other jurisdiction.

42 percent of the people, that is
620 people in the Allegheny County Jail, were
detained by Allegheny County Adult Probation.
These individuals were detained for violating
probation on a crime for which they had
previously been convicted. Of those, 86 percent,
that is 532, were of moderate or high risk to
re-offend based on their Probation Proxy Risk
Score. The remainder were being held for a
variety of reasons, including violent felonies,
awaiting mental health commitments or service
plans, and other reasons related to their own

1 safety or the safety of the community.

29 percent, that is 37 of 126 people in alternative housing, were detained by Allegheny County Probation. 84 percent of those folks, that is 31 of 37 people that were detained in alternative housing, were of moderate or high risk based on their proxy score.

22 individuals in the jail itself
have been seen by the Behavioral Assessment Unit.

17 are male, and 5 are female. All individuals
seen by the Behavioral Assessment Unit were seen
in the jail itself and not in alternative
housing.

25 individuals in the jail itself are committed to Torrance State Hospital and awaiting admission. Additionally, 24 individuals currently at Torrance State Hospital are wards of the Allegheny County Jail. No individuals in alternative housing are awaiting Torrance State Hospital commitments.

27 percent of people in the jail itself were held pretrial only. That is 402, meaning they had no other reason, such as external holds or detainers keeping them in the jail. Of these people, under 2 percent screened

as low risk for re-offense based on the Allegheny County Locally Validated Pretrial Risk Instrument without consideration of the seriousness of the current offense.

13 percent, that is 17 of 126
people in alternative housing, were held pretrial
only. None screened as low risk for re-offense
based on Allegheny County's Validated Pretrial
Instrument.

90 individuals, approximately 6
percent of the jail population, are currently
being held in the Allegheny County Jail pretrial
only on monetary bond. Of these individuals,
only 12 screened as low risk for new criminal
activity. There are currently no individuals in
alternative housing held pretrial only on
monetary bonds. All pretrial monetary bond cases
are reviewed for possible bail modification.

Just so we know where we're at, the Allegheny County Jail population excluding Federal holds but including alternative housing on March 16, 2022, which was right before the pandemic and when the world stopped was 2075, including 1,859 inmates in the jail itself and 216 in alternative housing facilities.

	98
1	As of July 4, 2023, as I've
2	previously read, the inmate population was 1,488,
3	a 20 percent decrease. And the alternative
4	housing population was 126, a 42 percent
5	decrease.
6	The detainer population in the jail
7	itself on March 16, 2022, was 889, and on
8	July 4, 2023, was 620, which is a 30 percent
9	decrease.
10	So that is the report. Yes.
11	MS. HALLAM: Two questions. The
12	first one, can you e-mail this too?
13	JUDGE LAZZARA: I did.
14	MS. HALLAM: Oh, you did e-mail
15	that? I didn't see it.
16	JUDGE LAZZARA: Yeah, I'm sorry.
17	I've had
18	MS. HALLAM: That's okay.
19	JUDGE LAZZARA: cases all
20	after into the afternoon.
21	MS. HALLAM: I'm going through my
22	inbox.
23	JUDGE LAZZARA: So it should be in
24	your inbox. I did it probably about I'm not
25	sure if I did it at 1 or at 3, but it should be

1	
1	in there.
2	MS. HALLAM: Okay. Thank you.
3	JUDGE LAZZARA: It went to
4	everybody on the Board.
5	MS. HALLAM: Thank you.
6	And then my second question is, and
7	I know I've seen this on the report before, but
8	all pretrial monetary bond cases are reviewed for
9	possible bail modification?
10	JUDGE LAZZARA: Correct.
11	MS. HALLAM: What does that look
12	like? Like how are they reviewed?
13	JUDGE LAZZARA: What happens is
14	sometimes those monetary bails are set at the
15	lower court level, so at the magisterial district
16	justice level, and so pretrial services
17	automatically flag those and brings them up to a
18	Court of Common Pleas Judge. So those are all
19	reviewed in Motions Court by a Court of Common
20	Pleas Judge. Some of them are changed. Some of
21	them are maintained, depending on what is
22	presented to that judge.
23	MS. HALLAM: Okay. Thank you.
24	JUDGE LAZZARA: And that depends on

who is doing Motions on that day.

25

1 MS. HALLAM: Okay. And it's -- so 2 is it everyone who gets arraigned? I just really 3 don't know. Is there any situation where an MDJ 4 isn't the one setting the initial bond or is it 5 basically every bond? 6 JUDGE LAZZARA: Generally, they're 7 being set down below. And then if it's a 8 monetary bond, they're automatically reviewed. 9 That's the policy of the Pretrial Services 10 Office. 11 MS. HALLAM: Okay. And then 12 non-mons that are through the MDJs are also 13 reviewed, or is it just monetaries? 14 JUDGE LAZZARA: Monetaries are 15 automatically reviewed. The other ones can be 16 reviewed if someone asks for the review. 17 MS. HALLAM: Okay. 18 JUDGE LAZZARA: Sometimes the 19 review is asked for by Pretrial Services, so they 20 will look at what was done down below and say 21 that, hey, I think we can change this, and 22 they'll go to Motions and ask. Sometimes it's a 23 defense attorney on behalf of an incarcerated 24 individual. So it all depends. 25 MS. HALLAM: So -- and that's

1 without exception, all monetary bonds are 2 reviewed without exception? 3 JUDGE LAZZARA: It's my understanding, yes. I mean, I'm not Pretrial 4 5 Services, and I don't do Motions, but that's my 6 understanding of what we do is every one of them 7 that's monetary gets reviewed. 8 MS. HALLAM: Okay. Cool. Thank 9 you. 10 JUDGE LAZZARA: That doesn't mean 11 that everyone that's monetary can get a change. 12 MS. HALLAM: Right. 13 JUDGE LAZZARA: That's not the 14 case. 15 MS. HALLAM: Okay. Thank you. 16 JUDGE HOWSIE: I think the reason 17 is because whenever bail is set at preliminary 18 arraignment, there's never a recommendation of 19 the monetary condition. So when district judges, 20 magisterial district judges impose a monetary 21 condition, it's always reviewed because there's 22 never a recommendation, including a monetary 23 condition. 24 The DA's office can also ask that a 25 person's bond condition be changed as well.

•		102
1	JUDGE LAZZARA: And Motions are	
2	heard every single day	
3	JUDGE HOWSIE: Monday through	
4	Friday.	
5	JUDGE LAZZARA: in the Court of	
6	Common Pleas of the Criminal Division. And so	
7	every single day's Motions are heard and dealt	
8	with.	
9	MS. HALLAM: Even on the weekend	
10	and holidays?	
11	JUDGE LAZZARA: Oh, no. Five days	
12	a week, Monday through Friday.	
13	MS. HALLAM: All right.	
14	JUDGE LAZZARA: Every day that the	
15	courts are opened.	
16	JUDGE HOWSIE: Thank you.	
17	With that being said, would you	
18	like to make a Motion for New Business?	
19	MS. HALLAM: Oh, sure. I actually	
20	have a question about this, but I guess I'll	
21	Motion and get a Second first.	
22	Motion to disburse Incarcerated	
23	Individual Welfare Fund into funds into the	
24	joint tablet commissary account of each	
25	incarcerated person in the Allegheny County Jail	

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1	based on the total population on the first day of
2	July, August, and September 2023. Each person
3	shall receive \$125 per month.
4	I'd like to Motion to approve and
5	ask for a Second.
6	MR. HERBINKO: Second.
7	JUDGE LAZZARA: Second. Sorry. We
8	had two seconds.
9	JUDGE HOWSIE: All in
10	MS. HALLAM: Well, yeah. In
11	discussion, I just had a quick question about
12	this.
13	So last month, we didn't vote on
14	this. Does that mean June they didn't get \$125?
15	JUDGE HOWSIE: They got the \$125.
16	What that means is this month it will be delayed.
17	MS. HALLAM: It will be delayed
18	because we're just approving it now for the July,
19	so it won't be at the beginning?
20	JUDGE HOWSIE: Yeah.
21	MS. HALLAM: Okay. So no months
22	will be missed?
23	JUDGE HOWSIE: Correct.
24	MS. HALLAM: Okay. Cool.
25	MR. HERBINKO: Before we vote, I

	104
1	wanted to make a note that the Controller's
2	Office did an analysis on this fund. We actually
3	included it in all your packets. It's on our
4	website if you want to take a look at it. I know
5	there's some questions from members of this
6	Board, and probably the general public about the
7	fund, so we broke it down for everyone.
8	MS. HALLAM: Thank you. And
9	Judge Howsie, I'd like a roll call vote on this,
10	too, please.
11	JUDGE HOWSIE: All in favor?
12	(Chorus of ayes.)
13	MS. HALLAM: Roll call vote,
14	please.
15	JUDGE HOWSIE: I'm about to.
16	MS. HALLAM: Okay.
17	JUDGE HOWSIE: Mr. Kamara?
18	MR. KAMARA: Aye.
19	JUDGE HOWSIE: Mr. Herbinko?
20	MR. HERBINKO: Abstaining as a
21	non-voting designee.
22	JUDGE HOWSIE: Ms. Liptak.
23	MS. LIPTAK: (Shaking head.)
24	JUDGE HOWSIE: Abstaining.
25	MS. HALLAM: I'm sorry. I didn't

	105
1	hear Ms. Liptak's vote.
2	JUDGE HOWSIE: She's abstaining.
3	Judge Lazzara?
4	JUDGE LAZZARA: Aye.
5	JUDGE HOWSIE: Sheriff Kraus?
6	MR. KRAUS: Aye.
7	JUDGE HOWSIE: Gayle Moss?
8	MS. MOSS: Aye.
9	JUDGE HOWSIE: Bethany Hallam?
10	MS. HALLAM: I'm an aye, but for
11	the record, Robert's Rules does require an
12	explanation if you're abstaining, and I notice
13	I think she abstained from the first vote today
14	too, and I was wondering if Ms. Liptak could give
15	an explanation why.
16	JUDGE HOWSIE: She's abstaining.
17	She's not voting, just like Mr. Herbinko did.
18	We'll now move on to the
19	MS. HALLAM: Is that the reason,
20	Ms. Liptak?
21	JUDGE HOWSIE: We'll now move on to
22	the Warden's Report.
23	MS. LIPTAK: Address the chair.
24	You don't address me. Address the chair.
25	JUDGE HOWSIE: Warden's Report.

WARDEN HARPER: Good evening,

2 | Board.

JUDGE HOWSIE: Good evening.

WARDEN HARPER: <u>Visits</u>. The jail is continuing to host contact visits for the juveniles, incarcerated workers, veterans, program participants on designated Saturdays on each month.

Chaplaincy Program. The jail has reintroduced mixing pods for services for our Protestant, Catholic, and Muslim incarcerated individuals. This means the individuals residing on different housing units are able to attend services together either on the level gym or in the chapel. Mixed pod services were temporarily postponed during the pandemic.

The Chaplaincy welcomed two

Catholic deacon candidates who are preparing to

welcome seminary interns later in the year. The

Chaplaincy is also looking to add clinical

pastoral educational interns from the Pittsburgh

Pastoral Institute this fall. The goal of these

interns would be to provide interfaith spiritual

support and pastoral care to individuals

requesting chaplaincy visitation.

Discharge and Release Center. The DRC assessed 349 individuals and distributed 78 boxes of Narcan in May. Those totals represented the highest numbers so far this year.

In June, the DRC assessed 334 individuals and distributed 69 boxes of Narcan. The DRC continues to make referrals to the community partners for services and assistance and to provide resources to assist individuals upon their release.

The Therapy Dog, Link. The AHN therapy dog conducted its third visit with the juvenile population on May 26th.

Employee of the Month. I would like to announce that Assistant Payroll Coordinator Dawn Ruth and Licensed Practical Nurse Bertha Chinke were named employee of the month for the month of May, and Sergeant Chuck Joseph Sarver and Facilities Carpenter Joseph Jones were named ACJ employee of the month for the month of June.

Now I would like to pass it over to Chief Deputy Warden Jason Beasom.

CHIEF DEPUTY WARDEN BEASOM: Thank you, Warden. Good afternoon, Board.

The Jail Administration would like to pass on its congratulations to Ms. April Reynolds. She was promoted to the Residential Placement Manager position.

Under Staffing. Our training academy graduated 12 cadets to full-time corrections officers on Friday, May 26th. We began a new cadet class on Tuesday, June 20th with 9 candidates. They are scheduled to graduate on August 25th.

Current physical agility testing is underway for the next cadet class. We had sessions yesterday, today, and scheduled for this Saturday.

PA-DOC Transfers. Currently, we have 21 males, 2 females with 300 B's in the facility, 13 males, with detainers, and 12 males with open cases. The longest wait time on a 300 B was received June 6th, and the shortest wait time is from June 28th.

Federal Inmates. We currently have 33, 18 of which are United States Marshal holds, and 15 are Federal transfers for Allegheny County Court.

Use of Force Numbers for June of

2023 was 37.

I'll pass it on to Deputy Warden
Clark to continue.

DEPUTY WARDEN CLARK: Good evening,
Board. The residential placement services
department transferred 137 individuals to
alternative housing in the months of May and
June.

Also, in May and June, the Diversion Department released 52 individuals to substance use treatment programs. In May the Diversion Program had 38 new referrals and a total of 83 total participants. And in June there were 36 new referrals and a total of 88 participants.

In the months of May and June, the Medical Assistance Program assisted a total of 247 individuals with completing Medical Assistance applications upon release from the jail.

Reentry Services. Through the jail's partnership with Community Kitchens of Pittsburgh, the jail is committed to ensuring that all kitchen workers obtain their Servsafe Food Handlers Certification. In May and June, a

total of 38 workers completed the course and passed the test to become Servsafe certified. Individuals who are Servsafe certified have demonstrated that they have the required knowledge of food handling and safety regulations. Earning this certification while incarcerated makes it easier for individuals to obtain employment in the food industry post-release.

Hard Reduction Education Groups for the Veteran and Reentry Population, will begin in the jail's Reentry Center on July 11th. These groups will focus on coping skills, recovery and relapse, community treatment resources, harm reduction, and overdose prevention.

The jail has renewed a prior partnership with Amachi for family support programming. Amachi will provide services to individuals in the jail, as well as to their families in the community. Individuals in the jail will be receiving parenting programming that is targeted to supporting incarcerated parents.

Families in the community can participate in financial empowerment classes, social outings and activities at cultural and

recreational locations throughout the city, and they would be eligible to receive targeted support based upon the family's individual needs.

In May, the jail's program team members participated in a 2-1-1 training. 2-1-1 is a hotline run by the United Way that provides referrals and resources for all Allegheny County residents. The purpose of the training was to inform staff of the benefits of the program so that they can better support the incarcerated population. Informational posters on 2-1-1 have been posted in the jail, and a video explaining the program has been uploaded to the tablets.

In an effort to expand resources to the incarcerated veteran population, the jail has coordinated services with the Peace Education Program and Revival Today Veteran's Brigade. The Peace Education program provides groups with focus on several areas of self-improvement.

Those areas include inner peace, appreciation, strength, self-awareness, clarity, understanding, dignity, choice, hope, and contentment.

The mission of Revival Today

Veteran's Brigade is to honor and support our

nation's veterans by fostering spiritual growth,

providing resources to support their physical and emotional well-being, and empowering them to lead fulfilling lives.

The Educational Services Department began summer education services for the juvenile population on June 12th. Classes will run through July 14th and consist of a full class schedule from 8:30 a.m. until 2:20 p.m.

At the conclusion of the summer educational classes, the juveniles will be offered Servsafe training and will be afforded the opportunity to take the test to become Servsafe Certified.

On June 7th, we are excited to host an in-person graduation ceremony. This academic year we had a total of 12 graduates. Three of those graduates were still housed in the jail, unable to participate in the graduation ceremony. Of those graduates, two received their community high school diploma, and one received the Pennsylvania Secondary High School Diploma. Graduates were able to have loved ones present for the graduation ceremony and celebration. We look forward to hosting another graduation ceremony in December.

Lastly, on June 28th, we
transitioned our new food service provider,

Trinity, into the facility, and that transition
has gone well, and we're excited to have them

onboard.

That concludes this month's report for programs. Dr. Brinkman will provide the healthcare report.

HSA DR. BRINKMAN: For medications for opioid use disorder and the expansion of efforts, our continuation of MAT includes the following from June. There were 25 prescribed Naltrexone, with 2 receiving their Vivitrol injection prior to release. 120 were treated with Suboxone, and 14 treated with Sublocade. Of those, 8 patients transitioned from Suboxone to Sublocade to support their recovery.

Methadone continuation services
have treated 42 individuals with 25 current
patients. And we've achieved our next milestone
in our MOUD expansion of services. In June, we
expanded criteria for eligibility to recently
expired orders or inactive MOUD service
participation for eligibility to participate in
the Buprenorphine program. This was another step

toward our ability to manage induction of

Buprenorphine at -- Buprenorphine MAT. In order
to reach this current milestone, a significant
amount of collaboration with both our pharmacy
and the Buprenorphine supplier that we have to
ensure that we would have access to sufficient
medication supply was necessary to get there.

For Torrance, during the month of

June we had 7 patients admitted and transferred

to the hospital. 6 patients were committed. 5

patients had their commitment to Torrance State

Hospital for competency restoration rescinded due

to their clinical stabilization.

And currently, we have 23 patients awaiting admission to Torrance, with the longest waiting since March 31st.

Regarding our Tier 4 and 5's mental health data, in June one individual was identified as a Tier 5 in the mental health tier system, and 43 unique individuals were identified as Tier 4.

And regarding our medical appointment queues, our sick call requests had 9, by the time I left for today, with the longest waiting one day.

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1	Our mental health sick call
2	requests had 19 patients, with their longest
3	waiting 6 days.
4	Our psychiatry appointments have
5	176, with the longest waiting 45 days, and our
6	mental health specialist appointments had 20
7	patients waiting, with the longest waiting 2
8	days.
9	WARDEN HARPER: We are now prepared
10	for any questions that you may have.
11	MS. MOSS: This is for Chief Deputy
12	Beasom. I didn't get the number. You said there
13	was 12 graduate you had 12 that just
14	graduated? Was that your did I get that
15	right?
16	CHIEF DEPUTY WARDEN BEASOM: For
17	our cadets, Ms. Moss?
18	MS. MOSS: For students. Cadets,
19	that's what I'm saying.
20	CHIEF DEPUTY WARDEN BEASOM: Yes,
21	ma'am. Our training academy graduated 12 on
22	May 26th.
23	MS. MOSS: Okay.
24	CHIEF DEPUTY WARDEN BEASOM:
25	Currently, we have 9 in class right now.

_	116
1	MS. MOSS: Okay. And those are
2	going to graduate in August?
3	CHIEF DEPUTY WARDEN BEASOM: In
4	August. Yes, ma'am.
5	MS. MOSS: And there's 9?
6	CHIEF DEPUTY WARDEN BEASOM: Yes.
7	MS. MOSS: So that brings up our
8	numbers to 21 there will be 21 new people,
9	right?
10	CHIEF DEPUTY WARDEN BEASOM: Once
11	we get this current class graduated, yes.
12	MS. MOSS: And they will add to the
13	workforce.
14	CHIEF DEPUTY WARDEN BEASOM: Oh,
15	yeah. And like I said, we're currently doing
16	physical agility tests. We have 19 that have
17	passed that phase of the hiring process so far,
18	so we're going to continue on with that. Like I
19	said, we have another session on Saturday, so
20	hopefully, we get some we can keep adding to
21	those numbers.
22	MS. MOSS: Okay. Thank you.
23	CHIEF DEPUTY WARDEN BEASOM: Yes,
24	ma'am.
25	JUDGE HOWSIE: I wanted to ask

from -- when you talk about your cadet class, how many cadets can you train at one time? Like what is the maximum number of people that could be in a class?

to keep it in the low 20s just because our classroom session where we have the training academy, that's how many -- that's how many computer terminals we have. So when they have to take -- if they have the review policy that's on there, they have to take tests, whatever it may be -- we've gone larger, but we just have to relocate it. So we'll train as many as we have right now, Your Honor.

JUDGE HOWSIE: Gotcha. So another question I had is now -- anecdotally, how have the numbers changed pre-pandemic versus post-pandemic in terms of your recruitment efforts? Are you finding that your classes are much smaller? You're having more difficulty recruiting people?

CHIEF DEPUTY WARDEN BEASOM: I mean, we're seeing -- we're seeing a lot of applications come through, so the Jail HR Department are reaching out to these folks.

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1	They're having them take the written test. Once
2	they pass that, then they engage schedule them
3	for the physical agility test. There's an
4	interview. You know, we keep moving through the
5	process you know, the medical the physical,
6	all those things.
7	JUDGE HOWSIE: Okay. One more
8	question for you.
9	CHIEF DEPUTY WARDEN BEASOM: The
10	numbers have been I'm pretty confident that
11	they're increasing right now.
12	JUDGE HOWSIE: They're increasing
13	now?
14	CHIEF DEPUTY WARDEN BEASOM: Yes,
15	sir.
16	JUDGE HOWSIE: Would you say that
17	there's been a decrease post-pandemic initially?
18	CHIEF DEPUTY WARDEN BEASOM:
19	Post-pandemic, initially, yes, sir.
20	JUDGE HOWSIE: Okay. Federal
21	inmates. My last question for you.
22	CHIEF DEPUTY WARDEN BEASOM: Sure.
23	JUDGE HOWSIE: You indicated that
24	you had I can't remember the number, but you
25	had Federal inmates. Is it safe to assume that

they are in State custody with Federal detainers, or do you have inmates that are actively just involved with Federal Court being housed in the county jail?

CHIEF DEPUTY WARDEN BEASOM: So 18 of the 33 are strictly there on a United States Marshal hold.

JUDGE HOWSIE: Okay.

CHIEF DEPUTY WARDEN BEASOM: They have Federal Court. The other 15 that are there are here for Allegheny County Court.

of the 18, is it fair to say that at some point they were State Court involved and then the Feds maybe indicted them, or do you have people that are just here, no involvement whatsoever with the county, strictly involved with Federal Court but being housed in the County Jail?

CHIEF DEPUTY WARDEN BEASOM: When we get the -- when we get the United States

Marshal come commitments, we don't have -- we don't get the charge information or anything like that.

JUDGE HOWSIE: Okay.

CHIEF DEPUTY WARDEN BEASOM: All we

have is the Marshal hold.

JUDGE HOWSIE: Okay. So once

3 there's a hold --

4 CHIEF DEPUTY WARDEN BEASOM: So

5 what their court involvement was, I don't know.

JUDGE HOWSIE: So once there's a

7 Federal hold by the Marshals, they're Federal

8 | custody, period?

9 CHIEF DEPUTY WARDEN BEASOM:

10 | Correct.

1

JUDGE HOWSIE: Because they can't

12 get out regardless?

13 CHIEF DEPUTY WARDEN BEASOM: Yes,

14 sir.

15 JUDGE HOWSIE: Understood. Last

16 question. Can you speak to the transition with

17 Trinity? You indicated it went fairly smooth.

18 | wanted to know what do you think -- why was it so

19 smooth, and what do you think the differences are

20 regarding the food that's being served now versus

21 the food that was previously being served? And

22 I'm not looking to slander any companies. I

23 think I'm just trying to understand why do we

24 have an increase in satisfaction? If you might

25 be able to speak to that.

1	DEPUTY WARDEN CLARK: So the
2	transition that took place was detailed, thought
3	out, and a lot of time and effort was put into
4	working with Trinity and onboarding them to make
5	sure that the transition was smooth.
6	We have received a lot of positive
7	feedback regarding the quality and quantity of
8	the food from the inmate population as well as
9	employees in the facility.
10	JUDGE HOWSIE: Do you attribute
11	that to just better cooks, better chefs? What do
12	you is it just better quality of food?
13	DEPUTY WARDEN CLARK: It's a nicer
14	quality of food. And in addition to that, we
15	have a captain and a sergeant in the kitchen that
16	are helping provide oversight of the kitchen.
17	JUDGE HOWSIE: Do you find that
18	there are more food options? Is that part of it
19	as well, or the same number of options?
20	DEPUTY WARDEN CLARK: Some of the
21	options are different.
22	JUDGE HOWSIE: Okay.
23	DEPUTY WARDEN CLARK: But there is
24	a variety.
25	JUDGE HOWSIE: Okay. Thank you.

That's my question. Thank you.

MS. MOSS: Since we're talking about the food, the last time that I was there, they were -- they had -- some of the residents were working in the kitchen, and so they were in there longer hours, and they were going to make a place for them to have when they had their off-time. There was going to be a room with a TV put there or whatever. And I'm wondering how far we got along with that.

DEPUTY WARDEN CLARK: There is a break room in the kitchen area where individuals can take a break to eat and just get away from working in the food line for that period of time. Yes, that's happened.

JUDGE HOWSIE: Judge Lazzara.

about how service providers are being able to conduct the interviews of incarcerated individuals in the jail. And I don't know who that goes to, but I mean, my understanding is, you know, before when we had a service provider from, say, an inpatient drug and alcohol provider or from a CRR, that they were able to do those interviews which they will not take anyone out of

the jail without the interview. They were able to do those all via video, and it was working incredibly well. And we were able to very quickly get people out.

And my understanding in mental health court, I hear complaints pretty much every Monday now that that's not able to happen.

DEPUTY WARDEN CLARK: Okay.

JUDGE LAZZARA: And that providers are not able to do those via video, and therefore we're having a much harder time getting people into programs because they have to have somebody from that program come down to the jail. They have to be properly credentialed to get into the jail. And so I'm hearing complaining every single week about the fact that it's changed.

So I want to know when it changed, why it changed, and why we can't go back to what we had before, which was working?

HSA DR. BRINKMAN: Well, I can talk about some of that, and we can pass it around.

So we had a very large influx in the last month or so of a variety of community providers who had gone through security training and submitted their credentials for security

clearance, and I'm seeing them on an almost daily basis throughout the jail. So I know that there were some capacity issues with all of the video complexes to be able to strictly be limited to video, but I also know from some of the people, like the supervisors from agencies, have directly come to me and asked, we want our staff back in the jail and they were asking for clearances, and that's what's happened over the past month or so is them coming back into the jail because some of the agencies were wanting them back in.

I don't know if that's true across
the board, but I can tell you --

mean, all I can tell you is that this has gone on for more than the past month because I was going to ask it at last month's meeting when we did not -- were not able to continue with our meeting. And so it was happening enough before that that I know there was a problem. And I know that some of the places are complaining that they certainly can't get people credentialed to be able to get them in. So I mean, you know, I have people in my mental health court that are waiting to be assessed by programs who would like to take

them, who have beds available to take them, and they're being delayed in getting out because we can't get them assessed.

through the Healthcare Department because there's an affiliation with our mental health programs have gone through the security training. And if there are any that had issues going through any of those, I'm happy to field those too.

JUDGE HOWSIE: Warden, there was a comment about AA and NA meetings. I know in the past, there was an issue with parties not being able to conduct the NA meetings. Did you ever have that -- were you able to resolve that issue? The gentleman came to a meeting, and he indicated he was unable to come in and do NA meetings in the jail. There was concern about his background check, and I was just -- was there ever any movement on that issue?

WARDEN HARPER: Yes, sir. We did have one of our program administrators contact those individuals to ask them to put their clearances in, and they never provided their clearance information. But as soon as they provide the clearance information, we can run it,

1 but they've never provided the information to us. 2 JUDGE HOWSIE: So there's no NA 3 meetings now being held? 4 WARDEN HARPER: We do have NA 5 meetings for HOPE. So you want to talk a little 6 bit about that? 7 DEPUTY WARDEN CLARK: Yes, 8 Your Honor. They are doing 12-step meetings with 9 the HOPE population as well as the substance 10 abuse population. Those happen several times 11 throughout the week. 12 JUDGE HOWSIE: Okay. So I mean, is 13 that the entire facility? 14 DEPUTY WARDEN CLARK: It's not the 15 entire facility. 16 JUDGE HOWSIE: Okay. 17 DEPUTY WARDEN CLARK: It was 18 targeted to those programs. Those are the 19 targeted programs with substance use individuals 20 in there, so we've streamlined the resources for 21 those. 22 JUDGE HOWSIE: So to get to 23 participate, you'd have to be involved in one of 24 those programs is the point. All right. Thank 25 you.

JUDGE LAZZARA: And those programs

are limited, right? There's a limited number of

people, and then there's also limits on if you

have certain classifications, you can't

participate in HOPE and substance abuse, right?

DEPUTY WARDEN CLARK: Yes, that's

correct.

JUDGE LAZZARA: So we need to get the NA and AA back in the jail. I mean, that just --

JUDGE HOWSIE: Is there a way we can do that?

MS. HALLAM: Can I just interject to say, if you remember, the issue was that they had changed the requirements, the restrictions on what prior convictions you could have. So prior, when the man who I think you're referencing was coming in here and asking about meetings, it was that they had changed the policy about his record. His record hasn't changed, so I know when the Warden is saying submit your clearances -- what is that -- when he was saying some of your clearances, the issue was that he knew he couldn't get the clearances. He had never had them but yet was allowed to bring

1 meetings into their prior. 2 JUDGE LAZZARA: But there's got to 3 be other people -- sorry. I mean, there have to 4 be other members of NA and AA who would be able 5 to meet the clearance requirements that we should 6 be able to bring in, because it would be nice to 7 have that available --8 JUDGE HOWSIE: To everyone --9 JUDGE LAZZARA: -- to people not 10 just on the HOPE and substance abuse pods, 11 because those are limited pods. 12 MS. HALLAM: Agree. 13 JUDGE HOWSIE: Mr. Herbinko, it 14 looks like you have a question. 15 MR. HERBINKO: Yeah, I did. 16 is for the Warden. The Controller's Office, both myself and the actual Controller, have asked for 17 18 a written report from you based on the changes 19 you made from the NCCHC review. What is the 20 status of that report? 21 WARDEN HARPER: That report came 22 from the Manager's Office. 23 MR. HERBINKO: Okay. 24 WARDEN HARPER: So that would have

to -- the request would have to go through the

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Manager's Office.

MR. HERBINKO: Okay. Great. Thank

3 you.

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4 JUDGE HOWSIE: Anyone else?

5 (No response.)

JUDGE HOWSIE: Ms. Hallam.

7 MS. HALLAM: Ryan, I think the

8 manager is sitting right next to you if you want
9 to get that.

MR. HERBINKO: I'm sure we can talk

11 later.

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MS. HALLAM: Thank you. Thank you.

I do have a few questions. I'm actually going to

say I like this like joint Warden/Deputy Warden's

Report because then I don't have to guess who my

questions are for. So thank you for putting that

17 all together in one.18 Okay.

Okay. So I want to start off by talking about, you know, we've heard a report about a correction officer breaking Aaron

Tipton's arm. And so I want to know what are -- what does like reprimand look like for an employee who was involved in a situation like that, even if you can speak specifically to this employee? I think they said it was D. Angelo is

the name.

WARDEN HARPER: Ms. Hallam, you know I can't get into specific detail about these personnel issues. But I will say this, every use of force that occurs at the Allegheny County Jail has a review at the Captain's level, Major's level, Deputy Warden's level, and Internal Affairs. If Internal Affairs feel that there is a need for criminal prosecution, they will send it to the courts to make that determination. So that is the process for all uses of force at the jail. And Internal Affairs, our police, will make the determination from the course of the DAs whether to press charges or whether to recommend discipline for individuals that may have violated our policies and procedures.

MS. HALLAM: Okay. And then, you know, is there any outside of the county independent entity that reviews maybe severe uses of force such as when -- I mean, I saw some pictures in this document that we were given of what looks like a rod in Mr. Tipton's arm as a result of this, so I guess I'm just wondering who other than the people you listed who work for the jail and then IA, who I know is county police,

reviews this?

2 WARDEN HARPER: That's it, ma'am.

MS. HALLAM: That's it. So no one outside of the county? No independent authority?

Okay. Thank you for that.

Next, I would like to know about -it was referenced that people who work in the
kitchen get breaks but not how frequently or how
long the breaks are. So could you speak to those
breaks?

DEPUTY WARDEN CLARK: I don't have that information with me. I would have to check with our sergeant and captain in the kitchen and provide that to you.

MS. HALLAM: Does anyone here know how the breaks work for people who work? So these are incarcerated individuals, who I think last time I was there, they said they are now working like 10- to 12-hour shifts. Is that still the case? They were working longer shifts for a period?

CHIEF DEPUTY WARDEN BEASOM: For a period of time. They were doing what was called an A and B schedule. They would work a day; they would have the next day off. And then we would

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leapfrog like that through the week. They're	132
back to the traditional schedule we had in place	
before then	
MS. HALLAM: A.m., p.m.?	
CHIEF DEPUTY WARDEN BEASOM: Before	
that, yeah, correct.	
MS. HALLAM: Okay. And yeah, so	
the breaks though, no matter if you work a	
morning shift or an evening shift, no matter how	
long your shift is, you still everybody gets	
the opportunity for a break?	
CHIEF DEPUTY WARDEN BEASOM:	
Absolutely.	
MS. HALLAM: Okay. Cool. Yeah, I	
would really like to know how long those are,	
what that looks like.	
The other thing is you talked about	
the new food service being Trinity. Why do I	
remember that name? Were we in contract with	
Trinity before?	
DEPUTY WARDEN TOMA: Correct.	
Trinity was the service provider, prior to	
Summit.	
MS. HALLAM: Okay. So we didn't	
get a new service provider. We just got one that	
	back to the traditional schedule we had in place before then  MS. HALLAM: A.m., p.m.?  CHIEF DEPUTY WARDEN BEASOM: Before that, yeah, correct.  MS. HALLAM: Okay. And yeah, so the breaks though, no matter if you work a morning shift or an evening shift, no matter how long your shift is, you still everybody gets the opportunity for a break?  CHIEF DEPUTY WARDEN BEASOM: Absolutely.  MS. HALLAM: Okay. Cool. Yeah, I would really like to know how long those are, what that looks like.  The other thing is you talked about the new food service being Trinity. Why do I remember that name? Were we in contract with Trinity before?  DEPUTY WARDEN TOMA: Correct.  Trinity was the service provider, prior to Summit.  MS. HALLAM: Okay. So we didn't

133 1 we had before prior to Summit. 2 DEPUTY WARDEN TOMA: It's a 3 new-awarded contract, correct. 4 MS. HALLAM: The next thing is --5 oh, yeah. So I went for a visit, I don't know, 6 an inspection, what was that, a week ago? 7 for the weekend of 4th of July, something like 8 that, and it was the third time now -- I'm not 9 going to give my report because I didn't write it 10 up yet and I know you're going to say something 11 about that so before you do, I'm not going to 12 give my whole report. I just want to 13 specifically say this is now the third time in a 14 row that I have went for a surprise, unannounced 15 inspection, and I was forced to wait an hour in 16 the staff entrance. 17 JUDGE HOWSIE: Are you going to 18 write up that report? 19 MS. HALLAM: Yeah, uh-huh. 20 JUDGE HOWSIE: When? 21 MS. HALLAM: Soon. 22 JUDGE HOWSIE: I just want to be 23 able to expect that to be posted to the website.

MS. HALLAM: I'll work on that,

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Judge Howsie.

1 I'm just specifically asking this 2 question right now because it has been a 3 detriment, and the statute is very clear. I have 4 it here for you. 5 JUDGE HOWSIE: The statute is very 6 clear about your obligation to write the report, 7 too, Ms. Hallam. So if you are going to do 8 visits --9 MS. HALLAM: I have like ten 10 reports in the works for you, Judge Howsie. 11 You're going to be so happy when all of this is 12 officially in the record of all the illegal 13 things the jail is doing. 14 JUDGE HOWSIE: The report going 15 back from years --16 MS. HALLAM: But please, this is my 17 time, Judge Howsie. 18 JUDGE HOWSIE: So what I was saying 19 was, it's also in the statute that you have to do 20 a report. The members of our community have a 21 right to expect to be able to review your report 22 on the website just like everyone else. 23 ask that if you're going to the jail --24 MS. HALLAM: Absolutely. 25 JUDGE HOWSIE: -- and you're going

to do a visit, and you're going to talk about what you observed in the jail, please follow the rule and document it by way of a report.

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MS. HALLAM: I will absolutely work But specifically, I just want to talk about this because it does say that it shall at all times be available for inspection by the Three times in a row now. And I'm not Board. talking 10 or 15 minutes. I'm saying they sit there, and they make me wait in the employee entrance for -- I think the past couple times, it's been Beasom and the Warden to show up to drive from their homes. They make me sit in the employee entrance. So who knows what's happening in that hour in the jail that I am not able to do a surprise inspection because of it? Warden Harper, could you please speak to why you've been doing that to me?

WARDEN HARPER: Ms. Hallam, one of the things I want to assure the Board is that we're going to give you complete access to the jail when you come to the jail, but I'm not going to assign a captain to escort a member of the Board around, taking away from their duties where they may be the only captain on shift. That's

why you had to wait these couple of times because I did not have appropriate supervisory staffing to escort you around alone. So that would go for any Board member.

So I need to provide supervision of that jail, and that's why the Deputy Warden and the Warden come to the jail to escort you around so that my supervisors can manage the jail.

JUDGE HOWSIE: And if you were asking, because you gave me a look, yes, I had to wait as well and so did --

MS. HALLAM: I wasn't asking.

JUDGE HOWSIE: Well, we both had to wait as well.

MS. HALLAM: Okay. But that's not okay. The whole point of a surprise, unannounced inspection is that they don't know you're coming. When they can hold me -- it's bad enough I drive like -- I hide my car and creep down the ramp, so nobody sees me until I get to the door, but then once I get there, I'm waiting an hour every time. And I know that there are staff members who are available to take me around. I know that for a fact because I've been offered it, but yet they've received specific orders from you that I

1 have to wait for you guys to come from your 2 homes. I don't mind making you come in on your 3 day off, but I don't want Beasom to have to drive 4 in on his day off to have to walk me around. And 5 this time, I was very clear I was going to one 6 place. It was to investigate a specific 7 incident. And I said I wasn't -- I even said, 8 I'm not going to be any trouble. I'm not 9 creeping around. Just let me go, and they made 10 me wait an hour. 11 So if none of my colleagues on this 12 Board have any issue with that, I guess I'll move on to my next thing. Okay. But I just want to 13 14 let you know that will be in my lawsuit. 15 So the next question I want to ask 16 is I heard something about like forty -- a 45-day 17 wait for psychiatry, and there was like 18 100-and-some people on that wait list. Can you 19 repeat those numbers again? 20 HSA DR. BRINKMAN: 176 and the 21 longest waiting 45 days. 22 MS. HALLAM: Okay. And that's for 23 psychiatry. So that's a problem. 24 HSA DR. BRINKMAN: Those are mostly 25 follow-ups. They're not new evaluations.

it's the ongoing maintenance that the patients 2 would be receiving.

MS. HALLAM: Is that less

4 important?

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HSA DR. BRINKMAN: No, I'm not saying it's less important, but it is intended -in the community, you would have free -- a more frequent -- sorry, a more infrequent visit after your first evaluation because they want to give time for the medications to start working. want to see how you're managing that medication adjustment that they've given.

MS. HALLAM: But that's not really what it -- how I understand a 45-day wait. A 45-day wait for me means like I need an appointment, and I have to wait 45 days to get it. You're just saying that there's 45 people under the care of psychiatry who could be looking for follow-ups?

HSA DR. BRINKMAN: No. I'm saying there are 176 patients that they're managing right now, which is -- we're seeing a population increase, and the providers themselves are scheduling their follow-ups for when they feel the treatment plan is necessary to follow them

1 up. 2 MS. HALLAM: So it's not 176 people 3 on a waitlist? It's a total. Only 176 people 4 are being cared for by a psychiatrist in the 5 jail? 6 HSA DR. BRINKMAN: That's how many 7 have a wait right now for their follow-ups and 8 those types of things. So that's the longest. 9 The most frequent that I saw while I was pulling 10 numbers was well under a month. 11 MS. HALLAM: Okay. But there are 12 176 people waiting for appointments right now? 13 HSA DR. BRINKMAN: Yes. 14 MS. HALLAM: Okay. I just haven't 15 seen a number that high since we've been getting 16 these stats, and so I'm --17 HSA DR. BRINKMAN: I think last --18 hold on. Scratched it out. It was over 100 for 19 the last time also. 20 MS. HALLAM: Okay. So there's a 21 trend of this many people waiting for 22

appointments, okay. HSA DR. BRINKMAN: Uh-huh. MS. HALLAM: The next thing is do

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you guys think that like we as a Board could take

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1	the cadet test, the written test and the physical
2	test to like see what it's like?
3	CHIEF DEPUTY WARDEN BEASOM: That's
4	administered through a vendor, so we would have
5	to
6	MS. HALLAM: Would yinz be down to
7	do it just to kind of see I know we've been
8	asking a lot about staffing and the cadet
9	classes. Would you guys be interested in like
10	team-building kind of thing we could do?
11	JUDGE HOWSIE: I'm honestly not
12	interested in being a cadet in the jail.
13	However, I would love for you to take the test
14	and apply for a job and get a job to work in the
15	jail.
16	MS. HALLAM: I'm actually
17	conflicted out. I can't be on County Council and
18	work in the jail. I've thought about it.
19	JUDGE HOWSIE: So wish you could be
20	the warden for a month.
21	MS. HALLAM: Forever, yeah.
22	JUDGE HOWSIE: Yeah, it would be
23	awesome.
24	MS. HALLAM: It would be actually
25	awesome. I agree. I would answer your questions

though, of the Board whenever I sat in front of you as the warden.

JUDGE HOWSIE: You wouldn't have any answers.

MS. HALLAM: I would. We wouldn't be in the situation we're in now. But I will proceed.

I think the lack of respect is kind of trending to the -- over the line at this point from you, so if we could -- I'm trying to really keep this focused and on task.

JUDGE HOWSIE: Go ahead.

MS. HALLAM: Okay. So the next question I have is it was spoke of 43 individuals who identified on -- who are on Tier 4 of the mental health categorization unit or however you call it. And so I've been having some issues with this because the past few months, we've been going back and forth, and it seems getting different answers each month about rec time received for people who are on Tier 4. So I know originally in a previous meeting Warden Harper had said there were -- there were -- Tier 4 and 5 did not get any rec. Brinkman, I know that you had said that they did get it, but then I had

received an internal e-mail from the jail that says, "And we know Tier 4, 5 inmates do not receive out-of-cell rec during their time under that status." So I'm just wondering if we could like, once and for all, just figure out what is the truth about people on Tier 4 and 5 and whether they receive rec. You had told us it was individualized, but yet it seems that the staff at the jail believe that it is a blanket by default denial of rec time.

HSA DR. BRINKMAN: So we didn't get to talk about this before. I think it's been two meetings since we did talk about it. I genuinely did not understand your question, and I mistakenly answered it.

MS. HALLAM: Cool. I understand.

HSA DR. BRINKMAN: So correct.

Tiers 4 and 5 do not have the rec because they had been assessed by a psychiatrist to require that emergency status. So whether it's because of suicidal thoughts that have suicide precautions in place or something along those lines, there wouldn't be rec.

MS. HALLAM: Okay. But it's -- doesn't the ADA require individualized

determinations for that?

what was assessed by those providers. So some of the criteria are going to be like their ability or potential for them to harm themselves or harm other people, and we're going to limit the access that they have to that -- to that. For example, I've seen in other hospital settings where somebody may not even have access to phone calls for a certain amount of time during that initial period.

MS. HALLAM: Okay. Yeah. I know one of the pods that I visited this past weekend was 5-D, which was, I think, people who are on the higher tier of the mental health status?

HSA DR. BRINKMAN: There's a

17 variety.

MS. HALLAM: Yeah. And that's what I was interested in, and like how they got access to tablets and phone calls. They don't get any visits, right?

HSA DR. BRINKMAN: Nuh-uh.

MS. HALLAM: And then in what tiers is that that they don't get any visits? Is it certain pods, or is it --

HSA DR. BRINKMAN: It's tiers. And
I don't have that in front of me to give you
correct answers because each of them are
progressive based on the stability of the
patient.

MS. HALLAM: Okay. So is it possible somebody could be a Tier 3 and not get visits?

HSA DR. BRINKMAN: I believe so, but I don't want to be misquoted.

MS. HALLAM: Okay. Next question is about -- you know, I heard it from public commenters, but you know, I wanted to kind of elaborate on it a little further because we had -- get this super detailed data sheet about healthcare services, right, and I swear I could tell you a lot about what people are being diagnosed with in the jail, but yet this last time it says Substance Use Services DNA, number of new admissions and the various numbers that are listed for that. Can you explain like what those services are because the numbers aren't the same as the people who you're listing on MOUD. So what is Substance Use Services?

HSA DR. BRINKMAN: So those are --

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1	that's our program that has been in place for
2	many, many years before we even did any MAT. So
3	it's your classic residential psychoeducation
4	treatment with a therapist and things like that.
5	So it's a completely separate type of program.
6	That's why it gets a little confusing now that we
7	have MAT.
8	MS. HALLAM: Because this used to
9	be all there was, and now there's something else,
10	so this is from before?
11	HSA DR. BRINKMAN: Right.
12	MS. HALLAM: Okay. And then what
13	about overdose numbers? I mean, I can tell you
14	how many people have an STD, but there's no
15	number on here about how many people overdose?
16	Is there a reason for that?
17	HSA DR. BRINKMAN: Those are just
18	old data points that were requested that we
19	report.
20	MS. HALLAM: Okay. So it wouldn't
21	be difficult to include overdoses on this report
22	if we, as a Board, requested it?
23	HSA DR. BRINKMAN: I would have to
24	find a way to tally it.
25	MS. HALLAM: But you do track that?

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1	HSA DR. BRINKMAN: Not actively
2	track it, but I would have to find a way to tally
3	it.
4	MS. HALLAM: Okay. You don't have
5	to you don't track overdoses that happen
6	inside the jail?
7	HSA DR. BRINKMAN: Not in a
8	concentrated place. So I don't know how to give
9	you an answer that you're happy with right now.
10	MS. HALLAM: I mean, you know that
11	from $5/16$ to $6/15$ , $12$ people tested positive for
12	STDs. You don't know that like 12 people
13	overdosed? It just seems weird to me.
14	HSA DR. BRINKMAN: I'm sorry that
15	it's weird to you. I don't know how to better
16	answer your question.
17	MS. HALLAM: Do other jails keep
18	track of overdoses?
19	HSA DR. BRINKMAN: I don't work at
20	the other jails. I don't know.
21	MS. HALLAM: Okay. Because I know
22	a public commenter mentioned another jail in
23	Pennsylvania that actually required the jail to
24	let them know of overdoses. So maybe I would be
25	interested in drafting that if anyone else is

interested in knowing when people overdose.

Yeah, okay? I will draft that for the next meeting.

Next question is, I know, unfortunately, Ms. Klein couldn't be here today, but she had referenced since the last meeting talking with a member of your team about intake questions. Was that you, Ms. Toma, that she was working with? Can you give us a status update on the questions she was looking to add to the intake?

DEPUTY WARDEN TOMA: Yes, Ms. Klein did reach out to me regarding some of the questions. I'm going to defer to Dr. Brinkman since that is a healthcare matter.

MS. HALLAM: Okay.

that she had spoken with were not people who work inside the jail on a regular basis. So I don't know that those people have -- were aware of what things are already in place in our intake processes. So what we learned from Ms. Klein, the information she was recommending we add are things that we do already collect as a part of our screening process.

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1	MS. HALLAM: Oh, so everything she
2	asked for is already in there?
3	HSA DR. BRINKMAN: Uh-huh.
4	MS. HALLAM: Okay. Cool. Thank
5	you. The next question I want to ask is, again,
6	a result of a public comment. I do not know what
7	a PICC line is, but somebody said PICC lines were
8	being done at the jail. Can you tell us what
9	that is and if those are being done at the jail?
10	HSA DR. BRINKMAN: It's a mechanism
11	to be able to give IV drugs. So it's pretty
12	common to be able to do those in other places
13	outside of hospitals. We have the staff and the
14	supplies onsite to do that.
15	MS. HALLAM: Okay. So you do
16	you do those there
17	HSA DR. BRINKMAN: Uh-huh.
18	MS. HALLAM: whenever, what,
19	somebody needs an IV?
20	HSA DR. BRINKMAN: If necessary.
21	MS. HALLAM: For medication?
22	HSA DR. BRINKMAN: Uh-huh.
23	MS. HALLAM: And then someone else
24	was speaking about you know, I've heard this
25	complaint but more generally about specific drugs

1 that people maybe are prescribed for 20 years, 2 and then they come in the jail, and they're not 3 allowed to be on those anymore. And so we 4 heard -- I think it was about Mr. Tipton as well, 5 about Gabapentin. And I am familiar with that 6 drug, and I'm wondering if it's something that is 7 not allowed in the jail? 8 HSA DR. BRINKMAN: It's very common 9 in correctional facilities for Gabapentin due to 10 its abusive nature --11 MS. HALLAM: Because people can 12 abuse it? 13 HSA DR. BRINKMAN: They can be --14 they can be abusing. They may not have addictive 15 properties, but they can be abused, and 16 particularly is a common thing to be found abused 17 in correctional facilities. So it's very common 18 in correctional medicine for that to be limited. 19 MS. HALLAM: Oh, like you do not 20 give it to people. I'm sorry. I think I 21 misunderstood you originally. You're saying that 22 it is common that it is not allowed in 23 correctional facilities? 24 HSA DR. BRINKMAN: Right. 25 MS. HALLAM: And is it allowed in

1 the Allegheny County Jail? 2 HSA DR. BRINKMAN: On a very rare, 3 with exception basis. We have an entire policy 4 about it. 5 MS. HALLAM: Okay. All right. And 6 so what medications does the jail allow for 7 people with chronic pain? 8 HSA DR. BRINKMAN: Almost every 9 other one. I can't think of one off the top of 10 my head that we would prohibit. 11 MS. HALLAM: So people get like 12 Oxycontin and Percocet and Vicodin in the jail? 13 HSA DR. BRINKMAN: On a limited 14 basis. 15 MS. HALLAM: Okay. And what is the 16 limited basis? Who decides? Their prescriber? 17 HSA DR. BRINKMAN: If the 18 physicians are -- the physicians are making the 19 treatment plans, yes. And then we will make some 20 other safeguards to make sure that that's not 21 something that could be divertible. 22 MS. HALLAM: Okay. And in -- I 23 know we heard about someone who was given it 24 before and then had it taken away. Why would 25 that happen? Like they were receiving a

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1	medication in the jail prescribed by a doctor and
2	then it was discontinued?
3	HSA DR. BRINKMAN: Potent I
4	don't know the specific instance.
5	MS. HALLAM: I'm just saying
6	generally.
7	HSA DR. BRINKMAN: Generally
8	speaking, that could happen because someone had
9	violated the prescribing policy.
10	MS. HALLAM: Okay. Is there any
11	other violations that would result in you, you
12	know, not receiving certain medication anymore,
13	or it would have to be specifically diverting
14	your prescription?
15	HSA DR. BRINKMAN: Um, off the top
16	of my I can't recall all the possible
17	instances.
18	MS. HALLAM: Okay. So it has to be
19	something involving that medication?
20	HSA DR. BRINKMAN: Uh-huh.
21	MS. HALLAM: Okay. The next
22	question I have I kind of want to get into a
23	little bit on some of the staff reports that
24	we've gotten lately because they've been a lot,
25	and I actually really want to John K., I mean,

awesome job dude. Like really, really, really informative reports, thorough. I love the graphs, so I can see, in addition to read. I love that you did the COs and the healthcare.

Just awesome job. I mean, I wish you could do this all the time. So in case anybody hasn't thanked you, I thank you. It is put into a really clear picture what I think we've been hearing from lots of staff members who have come in front of us, at least during my tenure on the Board.

And so, I know Warden Harper, I wanted to ask you a couple questions about it just so -- you know, you heard the letter from President Catena earlier, and he has instructed me to work with the Board members to try to -- whether it's form a subcommittee or whatever that may be to address the staffing issues at the jail. And so I think it's important to kind of get your input on why do you believe that staff morale is so bad at the jail?

WARDEN HARPER: I have no idea as to why morale is bad, ma'am.

MS. HALLAM: Okay. Why do you believe that the staff feels disrespected by the

administration?

WARDEN HARPER: Ms. Hallam, you're asking me questions from a survey that we just got yesterday. So I'm not prepared to even answer a lot of these questions that you're asking me right now.

MS. HALLAM: So was it a surprise to you that staff morale was so low in the jail?

WARDEN HARPER: I've had some knowledge that employees say that morale is low, yes.

MS. HALLAM: Okay. Do you plan to analyze and respond to the concerns that were presented in both of the staff surveys?

WARDEN HARPER: I plan on reviewing the survey with my team and see if there's anything that we can do, yes.

MS. HALLAM: Okay. Yeah, I'd love to talk to you about like, down the road, too, and just kind of see what did come as a result, because this is definitely the most exhaustive info that I have gotten -- picture that I have gotten of the jail since I've been here. So I'll follow up with you on that.

You know, one of the things that

154 1 I'm really concerned about in regards to the 2 newest report -- I mean, and remember, I only got 3 it when you did, that staff believes that 4 administrative decisions are putting their 5 licenses at risk, specifically medical licenses. 6 Is that a concern that has been brought to your 7 attention before? 8 WARDEN HARPER: Ms. Hallam, we just 9 got the survey yesterday. Like I just spoke to 10 you, we're going to talk to the team about the 11 results of the survey, so I'm not prepared to 12 talk about the survey at this time. 13 MS. HALLAM: Okay. I will not ask 14 any more questions about the survey. But has it 15 ever been brought to your attention that a 16 medical staff with a license of whatever kind, 17 that the administration they felt was making them 18 make decisions that could threaten that license? 19 WARDEN HARPER: Absolutely not. 20 MS. HALLAM: Never? 21 WARDEN HARPER: Absolutely not. 22 MS. HALLAM: Okay. Thank you very 23 much. 24 All right. And now, next question, 25 because this is another thing, I know we said we

were going to talk about in committee, but we haven't, is the recommendations from the NCCHC.

Two specifically that I want to point out and see if they have been addressed.

They title it JE02 receiving screening, and they say that this is essential. The amount of time an individual is kept in Intake exceeds most jail practices and places inmates at risk for not being treated or identified as requiring additional care. This practice falls short of the NCCHC standard. They talk about this being about the bifurcation of the intake process, that there is a two-tiered system between those who will remain in custody and those who will bail out.

So my question is what have you done to address the bifurcation of the intake process?

WARDEN HARPER: Ms. Hallam, we're looking at everything that the NCCHC recommended. We're in the process of looking at our intake process to see how we can better improve the process. We are not going to be able to accommodate everything with the NCCHC results just like that. It's going to take time. But we

So right now, can I give you a definite answer as to what we're doing. I'm talking to my team to develop a strategy how to improve processes.

MS. HALLAM: Have you ever completed the results of the NCCHC suicide prevention report? I know that has been going on for quite some time now and has it been completed?

WARDEN HARPER: And we've reported out to the Board that all of the abatements from their review has been done except for physical structures.

MS. HALLAM: I remember that. I'm just saying do you foresee that you're in compliance with the NCCHC Mortality Review will take as long as it has taken for you to work on the ones on the suicide prevention?

WARDEN HARPER: It will take some time, ma'am. Yes, ma'am.

MS. HALLAM: Okay. The next thing from that report is about the medically supervised withdrawal and treatment. It says

that the facility has a detox nurse only Monday through Friday day shift. Sporadically time assessment is inadequate for the management of these patients. A review identified multiple patients whose detox was poorly managed.

Have you done anything to address the detox procedures?

WARDEN HARPER: We're looking at all the recommendations to include our detox protocol. So I don't have an answer for you right now, but we will have a solution to every recommendation from the Mortality Review.

MS. HALLAM: Okay. Next, we had talked at the April and May meeting -- I know we didn't get to talk at the last one, about bills and invoices for emergency room runs and hospital stays. Anybody?

(No response.)

MS. HALLAM: Okay. All right.

Next, I want to ask specifically about the solitary confinement referendum because on the June Segregated Housing Report, there's some things that are listed. And if you need this statute about the solitary confinement ban, I have it here for your reference. Do you want me

1 to give it to you? 2 WARDEN HARPER: No, ma'am. I have 3 it here also. MS. HALLAM: Awesome. Thank you 4 5 for bringing that. 6 Okay. So now I want to go to 7 205-31, Subsection -- it looks like BB, and it 8 lists the exceptions to the -- it basically says 9 under these conditions you can hold somebody in 10 solitary confinement. Do you see that? 11 WARDEN HARPER: No. What page? 12 MS. HALLAM: It's only one page 13 that I have. It's 205-31. Section 205-31 under 14 B and then B. 15 WARDEN HARPER: Okay. Got it. 16 MS. HALLAM: Okay. So it says, "No 17 person may be held in emergency or short-term 18 solitary confinement unless" and it lists the 19 three. I'm not going to say them because I know 20 I say them every single meeting. I'm trying to 21 cut back. 22 So on the June Segregated Housing 23 Report, I notice that you added three new 24 exceptions, transfers to restricted housing,

court appearances, and behavioral reasons. Can

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you show me where in this subsection any of those three reasons are?

WARDEN HARPER: Ms. Hallam, I'm not going to try to show you where it is in Chapter 205. There was lapse in the operations at the jail as to why those individuals did not get their 4 hours of out-of-cell time. We made changes to the operations to ensure that we don't run into those issues again. So we were transparent, and we put those — that information on the report. I met with my team to make sure that we come up with a plan so that we don't have this going forward.

So no, I cannot show you that on 205. We made a mistake. We're going to correct the mistake.

MS. HALLAM: Great. Thank you.

WARDEN HARPER: Thank you.

MS. HALLAM: I appreciate that. So can -- so you said that it's more like operations issues. Have these operation issues ever came into effect since this bill has been law? Like, have you ever had to do any of these for any of these reasons before?

WARDEN HARPER: We just ran into

1 these issues recently.

2 MS. HALLAM: Okay. It's a new problem.

4 WARDEN HARPER: It's a new problem.

MS. HALLAM: Okay. But you do
acknowledge the three exceptions that are listed

7 in the referendum?

WARDEN HARPER: We're going to follow Chapter 205 to the letter, Ms. Hallam.

MS. HALLAM: Okay. So then speaking of that specifically, I have a breakdown kind of of April, May, and June's reports that you gave. I see each time it talks about a partial-day lockdown. So can you talk about what that means? Does a person get 4 hours out-of-cell time on a partial-day lockdown?

WARDEN HARPER: So a partial-day lockdown is basically due to searches being done on the pod. So say, for an example, we come on the pod, and we have to search Pod 3 Charlie.

That pod is locked down for that time period so that we can properly search that pod to ensure the safety of the pod. So that pod is partially locked down for that day. So that's basically what we're talking about.

1 MS. HALLAM: So do the folks on 2 that pod get 4 hours out-of-cell on that day? 3 WARDEN HARPER: Sometimes they may. 4 Sometimes they may not. 5 MS. HALLAM: So how do you think 6 that is shown in Chapter 205? Can you show me 7 where that allows -- where you're allowed to do 8 that? 9 WARDEN HARPER: If you look at 10 205-C, Reporting, A, it says "The dates and 11 reasons for any lockdown of the jail or any 12 section of the jail." 13 MS. HALLAM: Uh-huh. 14 WARDEN HARPER: So a pod is a 15 section of the jail. 16 MS. HALLAM: But you understand the 17 lockdown means that folks aren't allowed out of 18 the jail. How do you believe that this specific 19 explanation of a partial-day lockdown is 20 transparent about how many people are not 21 receiving out-of-cell time on that day? 22 WARDEN HARPER: It's only reported 23 if they're not getting the 4 hours out-of-cell 24 time, Ms. Hallam. So if we reported, they didn't 25 get the 4 hours out-of-cell time.

MS. HALLAM: But what I'm trying to understand is who on that pod -- when you put a partial lockdown, who on that pod is not getting?

Is there 10 people? Is there 30 people?

WARDEN HARPER: If there's 30 people on the pod, then it's 30 people.

MS. HALLAM: Okay. So you're using partial lockdown to reference a full pod lockdown?

CHIEF DEPUTY WARDEN BEASOM: That's exactly what he's referencing. If we lock a pod down, say in the morning until 10 a.m., that's listed on the report as a partial lockdown. The rest of the facility is under normal operations. But because of the referendum, we have to report that because they may not get to that 4-hour threshold because we had to keep them secure for whatever reason it may be.

MS. HALLAM: But you also have pod lockdowns and it's a different number than partial-day lockdowns. So for example, I'm looking at June. It says there was 20 total facility-wide/pod lockdowns; 15 times there was a partial-day lockdown; 13 facility-wide lockdowns; 7 pod lockdowns; so that facility-wide plus pod,

which the number of pod is not allowed, but 13
plus 7 equals 20, but there was 15 partial days.

So that's in addition?

CHIEF DEPUTY WARDEN BEASOM: So you're asking for the difference between a partial and a pod lockdown?

MS. HALLAM: Sure.

mean, there could be -- there's a myriad of reasons why we would lock down the jail for a partial segment of the day. It could be facilities reasons, could be security reasons.

We may have lost elevators or something like that, so for safety reasons, we have to lock them down until those issues are fixed. If that makes sense.

So the pod lockdowns specifically are more than likely because of a search that had to be completed. The partial lockdown is because of something else that happened during that day that we had to keep the whole facility locked down just until whatever issue was present was fixed.

MS. HALLAM: Okay. And then again, you mentioned like the safety and security, but I

do not see that language in this Chapter 205.

So, you know, it specifically says, "The Facility

Warden shall document specific reasons why any

lockdown is necessary while less restrictive

interventions are insufficient."

I don't know if I'm just not seeing the specific reasons on the report, but I've been asking for them every month. And if you are following 205 as excited as you seem to be to follow it, where is that?

WARDEN HARPER: Well, Ms. Hallam, I don't think you're going to agree with any explanation that we give, but safety and security is just what it is. We're going to make sure that the pod and the section of the jail is safe for all of our employees and inmates. So that's why we put safety and security. I mean, that's it. I mean, we're complying to Chapter 205 except for what you saw in the report, and we own up to that.

MS. HALLAM: Where are the pod-wide lockdowns? The only exception I see is A, facility-wide lockdowns. Where do you see the exception for the pod-wide lockdowns? I just don't see that in the law.

1 WARDEN HARPER: In the -- I just 2 read you where it says section of the jail. 3 MS. HALLAM: No, you read from 4 reporting. You did not read from exception to 5 the rule against solitary confinement. It says 6 facility-wide lockdowns, emergency use of 7 short-term solitary confinement, and request for 8 protective custody. It says nothing about a 9 partial lockdown, nothing about a pod lockdown. 10 WARDEN HARPER: Well, Ms. Hallam, 11 we're not going to come to an agreement here. I 12 believe under Chapter C, A, sections of the jail, 13 I can lock it down to do whatever searches that I 14 need to do. And it's clear here on Page 2, C, A. 15 MS. HALLAM: And where is the 16 specific reasons as required by the law for doing 17 that? 18 MS. LIPTAK: Point of order. May 19 I, Judge Howsie? 20 MS. HALLAM: Please. A non-member 21 of the Board is not allowed to interrupt me while 22 I'm asking questions respectfully and calmly. 23 You are not a member of this Board. Please do 24 not disrespect me. I have been respectful this

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entire meeting.

1 MS. LIPTAK: No, you haven't, but 2 this is not an interrogation of the staff. 3 staff is answering the questions, but he's not 4 going to be able to make a legal interpretation 5 of what the statute says. The jail provides this 6 They post it publicly. They indicate 7 the reasons. That is the requirement that 8 applies under 205. 9 MS. HALLAM: Point of order. 10 Judge Howsie, can you please let it be known that 11 the people who are not members of this Board are 12 not allowed to speak in this meeting? 13 JUDGE HOWSIE: She can make a 14 statement. 15 MS. HALLAM: No. It's not allowed. 16 There is no designee per statute. I'm not going 17 to rehash that law right now. 18 JUDGE HOWSIE: They may speak. 19 They may speak. 20 MS. HALLAM: Okay. My next 21 question is specifically about folks who are 22 listed as -- this is going back to April, all 23 right? 100 individuals kept in solitary 24 confinement because of their mental health 25 condition. And again, I'm asking where the

167 individualized determinations of the necessity 1 2 for that is, because it's not in the report, and 3 it's very clear in the law that that is to be 4 provided, documented, and individualized 5 determination of the necessity for that person's 6 confinement. 7 HSA DR. BRINKMAN: Can you direct 8 us to what section you're talking about? I'm 9 sorry. 10 MS. HALLAM: You mean where it says 11 that? Oh, okay. Exception to the rule against 12 solitary confinement. It says, "No person may be 13 held in emergency or short-term solitary 14 confinement unless." It's Subsection B, the 15 first point. The Warden has made and documented 16 an individualized determination of the necessity 17 for that person's confinement. 18 JUDGE LAZZARA: Wouldn't that be 19 contained in the file? You don't want to have a 20 medical documentation in a public report. 21 MS. HALLAM: I'm just telling you

what the law says.

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JUDGE LAZZARA: It's going to violate HIPAA. It says that they have to document it. It doesn't say that he has to put

it in that individual's mental health issue in a 1 report for the public to see. Like that's a 2 3 total violation of HIPAA. 4 MS. HALLAM: It's literally not. 5 The number of times any person has been subjected 6 to temporary solitary confinement with the 7 duration and reason for each confinement, as well 8 as the number of instances the person has been 9 held in solitary confinement more than once. 10 JUDGE LAZZARA: Bethany, I'm sure 11 it's in the file. 12 MS. HALLAM: But no. I'm actually 13 reading from the reporting bullet point at this 14 point. So we're talking specifically about the 15 reporting. There are three different sections. 16 In here, the first one defining what it is, the 17 second one talking about what the exceptions are, 18 and the third one being reporting mechanism. 19 That actually -- I just read that from the 20 reporting section. 21 WARDEN HARPER: So Ms. Hallam, if 22 you look at Page 7 of the report -- do you have 23 Page 7 there? 24 MS. HALLAM: Uh-huh. Yeah. 25 WARDEN HARPER: And it actually has

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1	each individual that was not provided out-of-cell
2	time for medical reasons or the asterisks, what
3	their age, ethnicity, race, sex, gender,
4	everything that's in compliance to Chapter 205.
5	MS. HALLAM: I would I agree
6	with those other things. What I'm talking about
7	is the reasons.
8	WARDEN HARPER: Medical reasons.
9	It says it right there. The reason, medical.
10	Reason, assessment. It says it right there.
11	MS. HALLAM: And I'm going to, you
12	know, redo again, that the Warden shall document
13	specific reasons. Medical is a very
14	WARDEN HARPER: That's my specific
15	reason, medical or assessment. It says it right
16	there on Page 7.
17	MS. HALLAM: So you're saying that
18	documentation of the individual's specific reason
19	exists somewhere? You're just not reporting it?
20	WARDEN HARPER: If you look at
21	Page 7, it says, Reason and we give the reason in
22	compliance to Chapter 205.
23	MS. HALLAM: I'm sorry,
24	Warden Harper. I think you're misunderstanding.
25	I'm asking if these individualized determination

1 of the necessity for their confinement, if you 2 document that somewhere? 3 WARDEN HARPER: It's going to be in 4 the medical record or the EHR. Yes, it's going 5 to be documented somewhere. Yes, ma'am. 6 MS. HALLAM: You have documented, 7 and you're just refusing to share with us? 8 WARDEN HARPER: We're not going 9 to --10 JUDGE HOWSIE: Yes, because it's --11 you can't share someone's medical information. 12 Come on. 13 MS. HALLAM: Go back to the statute 14 that is very clear that --15 JUDGE LAZZARA: HIPAA is a federal 16 law. 17 The books, papers, and MS. HALLAM: 18 records of the prison, including but not limited 19 to the papers and records of the warden, and 20 those relating to individual inmates shall at all 21 times be available for inspection by the Board. 22 It says nothing about except for the ones that 23 the Warden thinks he shouldn't share. 24 JUDGE HOWSIE: And it is available 25 for inspection. If you want to go down to the

171 1 jail and inspect it, you can. But to put that 2 detailed information about someone's medical 3 information in a report would violate HIPAA. Do 4 you have --5 MS. HALLAM: Well, that's what I'm 6 asking. If I go down -- if you're saying that if 7 I come to the jail, I can see individualized 8 determinations for why each of those 100 9 individuals were kept in solitary? 10 JUDGE LAZZARA: No. 11 JUDGE HOWSIE: No. 12 MS. HALLAM: You just said that. 13 JUDGE HOWSIE: I'm not saying --14 I'm saying the information is detailed and -- the 15 information is detailed. The manner and way in 16 which you think it should be, though, does not 17 make it unlawful or improper for them to detail 18 in the manner that they do. 19 So with that being said, we're 20 going to continue to disagree. You don't agree 21 with what he's saying. He doesn't agree with 22 what you're saying. He's offered you an

Do you have another question?

MS. HALLAM: I have plenty of

explanation. He documented in the report.

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questions.

JUDGE HOWSIE: Okay. Let's get to your next question.

MS. HALLAM: Thank you very much.

So I know we had mentioned before making sure that there was a copy of the solitary confinement referendum on the tablet. Has that happened yet?

DEPUTY WARDEN TOMA: That was posted.

MS. HALLAM: It was posted.

11 Awesome. Thank you.

When I was there this past weekend,
I had, you know, encountered people who were
concerned about not being able to file
grievances, specifically people who do not have
access to tablets. Has that been remedied? I
know I had talked to the CO at least on that pod,
but there are definitely people on pods who are
not able to file grievances.

CHIEF DEPUTY WARDEN BEASOM: Anyone that does not have access to tablets has access to a caseworker who can file a grievance for that person if they're deemed not safe to have a writing implement.

MS. HALLAM: Okay. And they

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receive a copy of that grievance whenever it's
filed with their caseworker?
CHIEF DEPUTY WARDEN BEASOM: We
would put that copy in their property when
they're released from whatever tier they're on.
When they're deemed safe, they can have a copy of
it.
MS. HALLAM: They just don't have
access to it while they're in the jail when they
need it.
CHIEF DEPUTY WARDEN BEASOM: I
don't know what you mean.
MS. HALLAM: A copy of the
grievance that they filed, any proof, any, you
know, paper trail, documentation that the
grievance was filed and received?
CHIEF DEPUTY WARDEN BEASOM: No.
Our grievance our paper grievances are carbon
copies.
MS. HALLAM: Uh-huh.
CHIEF DEPUTY WARDEN BEASOM: Okay.
The pink copy
MS. HALLAM: I seen them.
CHIEF DEPUTY WARDEN BEASOM: is
their copy. What I'm saying is is we have to

have somebody fill it out for them. We'll take that carbon paper. We'll put it in their property. Whenever they're able to access it, we'll give it to them.

MS. HALLAM: Okay. So they can access it. Just they have to ask permission?

CHIEF DEPUTY WARDEN BEASOM: Just not at that time because I can't give them those things until they're safe to have them.

MS. HALLAM: Okay. I mean, but this is also people who have had their tablet taken away because they broke it. I mean, why are they not safe to have a piece of paper?

CHIEF DEPUTY WARDEN BEASOM: Why would we give somebody that just broke a tablet another tablet to break?

MS. HALLAM: I'm not asking for a tablet. I'm saying like a physical -- the paper. The piece of paper, the carbon copy? Because what's happening is it's kind of seeming like a catch-22, right? The people who are able to file grievances on the tablets who have access to the tablet, they want -- they can't get a paper copy of it, right?

CHIEF DEPUTY WARDEN BEASOM: Sure

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1	they can.
2	MS. HALLAM: A paper copy of the
3	tablet?
4	CHIEF DEPUTY WARDEN BEASOM: You're
5	saying of the complaint that was filed through
6	the tablet?
7	MS. HALLAM: Correct.
8	CHIEF DEPUTY WARDEN BEASOM:
9	Correct. They do not get that.
10	MS. HALLAM: Okay. So once they
11	lose access to a tablet, they cannot see a paper
12	filing that exists?
13	CHIEF DEPUTY WARDEN BEASOM: It's
14	considered jail records, so unless we would get a
15	subpoena to release that, that's our property.
16	MS. HALLAM: And then the people
17	who don't have access to a tablet for a variety
18	of reasons, I have seen now on multiple
19	inspections of the jail, paper grievances were
20	not available on their floor. Because in
21	previous meetings, I was definitely told that
22	people who didn't have access to tablets
23	CHIEF DEPUTY WARDEN BEASOM: Do you
24	remember which specific areas you were in?

MS. HALLAM: Yeah. I'll give you a

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1	list.
2	CHIEF DEPUTY WARDEN BEASOM:
3	Please.
4	MS. HALLAM: Do you want me to
5	e-mail you a list?
6	CHIEF DEPUTY WARDEN BEASOM: Yes.
7	MS. HALLAM: Okay. So I think you
8	answered this question. It's the caseworker who
9	they should contact to get a hard copy of their
10	grievances that they submitted via tablet. So I
11	want a piece of paper of a grievance that I filed
12	via my tablet. Who is the person in the jail
13	that I contact to get that?
14	CHIEF DEPUTY WARDEN BEASOM: You're
15	asking once we would receive a subpoena?
16	MS. HALLAM: No. I'm just saying
17	I'm incarcerated in the jail. I filed a
18	grievance on a tablet. I want a paper copy of
19	that grievance. How do I get that? I can't get
20	that while I'm in jail?
21	CHIEF DEPUTY WARDEN BEASOM: No. I
22	just said you have to send a subpoena to the jail
23	for the record.
24	MS. HALLAM: That is the only way

you will give somebody a copy of a grievance is

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1	177 through a subpoena?
2	CHIEF DEPUTY WARDEN BEASOM: Yes.
3	MS. HALLAM: Okay. And how long of
4	a process is that?
5	CHIEF DEPUTY WARDEN BEASOM: When
6	we receive it.
7	MS. HALLAM: I know we had asked
8	before about a dentist. Is the dentist coming?
9	HSA DR. BRINKMAN: As I mentioned
10	before, they would like your
11	MS. HALLAM: Questions ahead of
12	time?
13	HSA DR. BRINKMAN: questions in
14	writing so they can be prepared.
15	MS. HALLAM: Right. But they will
16	come and answer them in person?
17	HSA DR. BRINKMAN: I don't know
18	that because they are not a local vendor.
19	MS. HALLAM: Well, I mean, the
20	person who actually does the dental stuff has to
21	be local, right, because he
22	HSA DR. BRINKMAN: The dentist is,
23	but that would not be who the vendor would
24	probably want to come. They would be choosing
25	who they would want to talk with you.

MS. HALLAM: Well, we specifically want to ask -- we said we want to talk to like the people who are actually providing, not some CO of some corporation.

HSA DR. BRINKMAN: We also don't know what kind of questions you want to ask. That's why they asked me to find out what the topic of discussion is.

MS. HALLAM: Okay. All right.

Next, I want to just ask a little bit about the books. Is there an update on the library? I know we had talked before about how many pods have been permitted to visit the library monthly. Can you speak to that?

DEPUTY WARDEN TOMA: Well, pods
don't visit the physical library. Book carts are
taken to them. And Ms. Moss actually posted a
report last month prior to the JOB meeting of the
outcomes of those meetings. So a lot of your
questions were addressed in writing in her report
from those meetings.

MS. HALLAM: Right. But I didn't get to ask you any questions. That's why I'm asking you now.

412-897-2010 -- 412-461-1838 (FAX)

DEPUTY WARDEN TOMA: No. So I'm

just informing you of that. But in regards to your question, you asked do they come down to the library. No, all book carts are taken up to the physical pod.

MS. HALLAM: And that is going to be that way forever? I thought we were maybe waiting to get to the point where people could go to the library. That's never going to happen?

DEPUTY WARDEN TOMA: Movement to the library is not something that is currently in the works. What we are focusing on is the movement of those physical books to the pods to the point where we have met with the Allegheny County Library Association to address our inventory issues and also to identify best practices for how to manage that inventory to be able to send it up to the pods, and then also to inventory it coming back.

MS. HALLAM: Okay. And then what about the licenses for the books through the E-Books? What happens if people want the same title at the same time? How many licenses do we have for each book that they have available on the tablet?

DEPUTY WARDEN TOMA: So yeah. So

1 we prio- -- during COVID, we met with the 2 Carnegie Library. They advised us to use a 3 seven-to-one ratio as far as the holds go, so we 4 have -- depending on how the books are licensed. 5 So we may have a simultaneous user license on a 6 book, and that is completely controlled by the 7 publisher. Some books we have to purchase 8 outright. 9

So again, based on those seven holds, if there's seven holds, we would look to purchase additional books or additional copies of that book. We also have multi check-outs, so it varies depending on the interest.

We also look to see how frequently that book is requested as well as if those holds are still currently within the facility and how long those holds have existed.

MS. HALLAM: So it really varies based on the title?

DEPUTY WARDEN TOMA: Uh-huh.

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21 MS. MOSS: And it's also on the report.

MS. HALLAM: How many for each -I'm looking more for like individual titles, like
certain books. Is there more licenses for

	101
1	certain books than other books?
2	MS. MOSS: Yeah. This is
3	MS. HALLAM: This was the total.
4	MS. MOSS: This was the total.
5	MS. HALLAM: Yeah, those were the
6	totals.
7	MS. MOSS: Yeah, those were the
8	totals for April and May.
9	MS. HALLAM: Okay. I believe that
10	is the end of my questions, but I do want to say
11	before we adjourn, can we please go into
12	executive session to discuss pending litigation
13	that this Board has been named in? I read an
14	article saying that Mr. Bacharach is representing
15	us as the Board in a lawsuit, and I was never
16	consulted about that. And so I was just
17	wondering I know it's more of an executive
18	session kind of thing. Can we go into one before
19	we adjourn the meeting to discuss?
20	JUDGE HOWSIE: We'll talk about
21	that after we adjourn.
22	Anything else? Any other questions
23	from anyone else?
24	(No response.)
25	JUDGE HOWSIE: No questions? No

### CERTIFICATE

I hereby certify that the proceedings and evidence are contained fully and accurately to the best of my ability in the notes taken by me via an audio recording of the within cause and that this is a true and correct transcript of the same.

Diane G. Galvin

Notary Public

Commonwealth of Pennsylvania - Notary Seal Diane G. Galvin, Notary Public Allegheny County My commission expires July 22, 2028 Commission number 1055705 Member, Pennsylvania Association of Notaries

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The minutes of Thursday, July 6, 2023's Jail Oversight Board meeting are provided by the County of Allegheny Office of the Controller Corey O'Connor.

Sincerely,

Corey O'Connor

Allegheny County Controller