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7	ALLEGHENY COUNTY
8	JAIL OVERSIGHT BOARD MEETING
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12	Thursday
13	February 1, 2024
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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	PUBLIC SPEAKERS:	3
2	Lu Randall	
3	Marion Damick	
4	Stephen Fisher	
5	James Waters	
6	Darrell Palmer, Jr.	
7	Brian Englert	
8	Diana Hull	
9	Sr. Barbara Finch	
10	John Kenstowicz	
11	C.J. Swanson	
12	Sharon Bonavoglia	
13	Kyna James	
14	Tanisha Long	
15	Roy Blankenship, Jr.	
16	Alan Guenther	
17	Carlos Thomas	
18	Anna Yatsko	
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you.

So we'll get right to business and hear from the Community Corrections Reports.

Passages to Recovery.

Community corrections reports

MR. PRICE: Good afternoon, Board.

JUDGE EVASHAVIK DILUCENTE: And

again, when you come to the microphone, if you

could please state your full name and spell your

last name.

MR. PRICE: Gregory Price,
G-R-E-G-O-R-Y; Price P-R-I-C-E. I'm the Director
of Treatment Operations at Passages to Recovery.

The current number that we have are 36 active clients. So out of those being employed, for the report date, we have 46 active clients, with 6 of those being employed, with 9 of them being exited.

We had 1 positive COVID case for staff. And we did submit a letter to the Board regarding an incident that happened on Sunday, January 28th. We do want to express our sincerest apologies to the staff and residents that were there. And I have my Chief Program Officer, Ms. Candace, here as well, and we'll

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1	open it up to questions.
2	JUDGE EVASHAVIK DILUCENTE: Anybody
3	have questions?
4	MS. HALLAM: Hi. Thanks for being
5	here.
6	MR. PRICE: Of course.
7	MS. HALLAM: Speaking of the 9
8	exits, can you just give us a summary of why
9	people were exited from the program?
10	MR. PRICE: I don't have the
11	specific number. I think one was successful, and
12	we had a few that were AMA and a few paroles.
13	I'll get those numbers for you, though.
14	MS. HALLAM: Okay. And when
15	they're AMA, do they go back to jail?
16	MR. PRICE: No. We try to set them
17	up with another provider.
18	MS. HALLAM: Okay. And can you
19	tell me about the other providers? Because I
20	also noticed in that letter that you sent us that
21	you talked about how the resident that was
22	involved in the altercation was sent to another
23	provider. I'm just wondering where those places
24	are that you send people to.

MR. PRICE: So it depends on where

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7 1 they live at and things like that. So you're going to have to see where they need to be at and 2 3 especially bed availability as well. 4 MS. HALLAM: Okav. And think I 5 know I had asked at a last meeting about the DOJ 6 settlement regarding the Medications for Opioid 7 Use Disorder and if your facility sees itself as 8 being under the purview as an alternative housing 9 facility of that settlement? 10 MR. PRICE: You didn't ask me that. 11 I'm sorry. 12 MS. HALLAM: Oh, was it just 13 Renewal that I asked? 14 JUDGE EVASHAVIK DILUCENTE: 15 asked Renewal. 16 MS. HALLAM: Oh, well, I meant to 17 ask you. So I'm sorry for thinking I did, and 18 I'll ask you this time. 19 MR. PRICE: Okay. 20 MS. HALLAM: If you could 21 familiarize yourself for the next meeting, maybe 22 with the DOJ settlement about providing medication for opioid use disorder to folks who 23 24 are incarcerated, if you have a plan to make sure

that that's implemented in your facility as well.

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had 14 successful completions, 13 transfers back to the ACJ, and 8 escapes.

There were no COVID cases, no overdoses, and no deaths.

Before I turn the podium over to our Clinical Director, do you have any questions to me in regards to the Work-Release Program?

MS. HALLAM: Yeah. I just want to ask for a little more information about the 13 who were sent back to ACJ. Can you tell us why they were sent back to the jail?

MR. ZAK: Various reasons. We don't do that on a whim. Usually if they bring in any drugs or alcohol into our facilities.

Sometimes we'll get a call from the jail that they have active warrants, and they have to get returned. And other individuals they've actually -- they write letters, and the same day they come over, they don't expect they're coming to an alternative housing program; they feel better being back at the jail. So many various reasons.

MS. HALLAM: So you're saying there are people who actually request to leave Renewal to go back to jail?

MR. ZAK: There are. Usually when they -- the first day they're brought over. We talk to them. We say, you know, think it over. You know, sleep on it. But for whatever reason, they want to be back at the jail.

MS. HALLAM: Okay. And then my next question is I know I had asked at the last meeting about all the ambulances and fire trucks that seem to always be in front of Renewal Center. Do you have any more information about those? It was specifically prior to the last month's meeting, seemed to be on Tuesdays. I don't know about other days.

MR. ZAK: I work primarily out of the Boulevard of the Allies location. I know the Allegheny County Commons, they have ambulances go to that building also. So I think that they may be going over there.

MS. HALLAM: Yeah, but they're not. Because I see them going to Renewal.

MR. ZAK: There's various reasons.

There's men and women with preexisting conditions where they have to call the ambulance for, you know, epileptic seizure or something in that nature.

1	MS. HALLAM: Okay. So for the next
2	meeting, could you just bring us information
3	about any time that emergency personnel were
4	called to Renewal Center? And specifically on
5	Second Ave, but I'd also be interested about
6	Boulevard of the Allies as well, any time that
7	there was 9-1-1 response for some reason and what
8	it was for.
9	MR. ZAK: Yeah.
10	MS. HALLAM: Thank you very much.
11	MR. O'CONNOR: Judge, I have a
12	quick question.
13	JUDGE EVASHAVIK DILUCENTE: Go
14	ahead.
15	MR. O'CONNOR: Somebody had
16	reported to us that there was a heating issue one
17	night. Was it fixed? The heat go out the
18	power go out?
19	MR. ZAK: Not that I'm aware of.
20	MR. O'CONNOR: Okay. We got we
21	were told on the 21st.
22	MR. ZAK: Do you know what facility
23	that's in?
24	MR. O'CONNOR: Let me check. I'll
25	send you an e-mail just to get an update on it.

But yeah, somebody said it was out, and I just didn't know if it was a facility issue or just a random occurrence that something happened. So, thanks.

(No response.)

JUDGE EVASHAVIK DILUCENTE: Okay.

9 Thank you.

MS. DETTORE: Hi, my name is Alaina Dettore. Last name is D-E-T-T-O-R-E. I'm the Director of Clinical Services for Renewal.

Just to further comment on Adam's numbers, 9 of those county discharges were from our Inpatient Program; 7 were successful, 2 were unsuccessful; 1 was sent back for threats, and 1 was sent back for theft.

And we continue to have Divine

Ministries coming every Thursday with our

females, an incentive program that we -- sorry,

it's a little distracting. The incentive program

that we have for our reentrants is successful. I

think we're seeing a better attitude, a better -
more motivated to engage in activities. And with

the nice weather, we've been able to go out on

recreational walks.

And I did just want to update that we did have our first reentrant on methadone admit today.

Does anybody have any questions?
Yes.

MS. HALLAM: Yeah. Just a couple.

So specifically the question I

asked earlier that was for you that I asked of

Passages.

MS. DETTORE: Yes.

MS. HALLAM: About the DOJ
settlement, if you guys have evaluated that and
decided if that's something that applies to you?

MS. DETTORE: So we have evaluated
it, and we are continuing to look into what it
would take to become a licensed provider at this
point.

MS. HALLAM: Okay. So do you believe, or is it the position of Renewal that the settlement applies to you, that it must be in effect at the same timeline as the jail's timeline?

DEPUTY WARDEN CLARK: Ms. Hallam, that actually does -- that was just, you know, a

settlement between the jail and the DOJ.

MS. HALLAM: Uh-huh.

DEPUTY WARDEN CLARK: However, the alternative housing providers, because they house our incarcerated individuals, they're going to be following our lead on that.

Methadone can be placed into alternative housing.

They currently do that. They also -- the alternative housing sites currently allow induction for Suboxone, and they've just started Methadone at Renewal, so once that process gets finalized and settled, then the next phase of that will be for them to look at induction for Methadone as well.

So those alternative housing facilities will be doing exactly as the jail is.

MS. HALLAM: Okay. Even if folks don't go there directly from the ACJ, if they go there from somewhere else?

DEPUTY WARDEN CLARK: That would be a determination for those programs to make, but if they're -- I mean, I can't speak for them on that --

MS. HALLAM: Yeah, that's why I was

1 asking them about it. DEPUTY WARDEN CLARK: Yeah. 2 I was 3 just referring to the individuals that are coming 4 from the jail. 5 MS. HALLAM: I appreciate that 6 information. That is very helpful. 7 JUDGE EVASHAVIK DILUCENTE: So but 8 you're saying that the individuals who come from 9 the jail, they are required to follow that 10 mandate? I'm not sure what your answer was. 11 DEPUTY WARDEN CLARK: They're not 12 part of that DOJ settlement. They are not 13 required to follow it. However, because we are 14 and because clients coming from the jail will be 15 falling under that, we have asked the alternative 16 housing providers to support those individuals in 17 their transfer to those facilities. 18 JUDGE EVASHAVIK DILUCENTE: Because 19 when somebody is transferred from the jail to 20 Renewal or Passages, they're still considered 21 under your custody. 22 DEPUTY WARDEN CLARK: Yes, 23 Your Honor.

therefore, it would seem to me that they would be

JUDGE EVASHAVIK DILUCENTE:

So

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required to do that since they're falling under your umbrella.

what we're asking. However, we're currently -that would be a contract amendment with those
providers, and any future contracts would include
that language specifically. The current contract
does not, but they are still -- they are still
taking those clients and working with those
clients and allowing them to be on those MOUD
medications.

JUDGE EVASHAVIK DILUCENTE: I mean, it would seem to me that the DOJ wouldn't allow you to send those people to Renewal or Passages if those entities were not going to give the medication. Is that -- do you -- is that true or false?

DEPUTY WARDEN CLARK: I don't know.

I know that the agreement was -- the settlement
was between the DOJ and the jail. But because
these alternative housing providers house our
clients, we want them to follow the same rules
and regulations that the jail is.

JUDGE EVASHAVIK DILUCENTE: Okay.

DEPUTY WARDEN CLARK: So it will be

uniform.

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JUDGE EVASHAVIK DILUCENTE: But

they're not doing it yet or they're doing it a

little bit yet.

DEPUTY WARDEN CLARK: Yes, they
are. They are doing it.

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8 Okay.
JUDGE EVASHAVIK DILUCENTE: Okay.

MS. DETTORE: We're continuing

anybody on Methadone, Suboxone, you know,

anything like that. We're not stopping that. I

think the question is are we going to initiate

it, correct?

14 MS. HALLAM: Uh-huh. Yes.

MS. DETTORE: So that is something that we are -- I don't know exactly if we are required, but I know that we're very interested and find it important.

MS. HALLAM: Well, if I can help you in any way make any connections to help do that, I will always be a resource for that.

I have another question because I refer people to Pathways a lot, which I don't completely understand the relationship of Renewal and Pathways. Can you tell me a little bit about

18 1 that? 2 MS. DETTORE: It's not -- it's not 3 my program. Yeah, I wouldn't want to give any, 4 you know, answer that wasn't appropriate. But I 5 can get you an answer for the next time. 6 MS. HALLAM: Yeah, I would like 7 that a lot because I get great, like, raving 8 reviews from folks that I send there, and they're 9 always very, very helpful in connecting people to 10 the services that they need. And I just never 11 really understand -- understand the relationship. 12 MS. DETTORE: We can -- we can get 13 you information on that and send it or have it 14 available for the next time. 15 MS. HALLAM: All right. Thank you 16 so much. 17 MS. DETTORE: Yep. 18 JUDGE EVASHAVIK DILUCENTE: Anybody 19 else? 20 (No response.) 21 JUDGE EVASHAVIK DILUCENTE: Okay.

22 Thank you.

MS. DETTORE: Thank you.

JUDGE EVASHAVIK DILUCENTE:

25 | Electronic Monitoring. Is anybody here to give a

19 1 report on Electronic Monitoring? That's Mr. 2 Esswein, right? 3 MS. HALLAM: Uh-huh. 4 JUDGE EVASHAVIK DILUCENTE: Okav. 5 All right. Well, then, we will move along to 6 Public Comment. 7 Remember everybody, you have three 8 minutes. I'm going to set my timer on my phone. 9 Let's all be respectful of one another. 10 First is Lu Randall. 11 PUBLIC COMMENT 12 MS. RANDALL: Hello. I feel pretty 13 optimistic that the sun has been out. Hi. 14 New faces. So I might not need to 15 go into as much detail as I will but based on the 16 past four years of previous administration, I'm going to. My name is Lu Randall. L-U, last name 17 18 R-A-N-D-A-L-L. 19 I'm President of the Autism 20 Connection of Pennsylvania and affiliated with 21 Achieva, and our mission is to be a lifeline for 22 people with autism and their families. 23 I sit on the PA Commission of Crime 24 and Delinquencies Victims Services Advisory

Council, the Adult Protective Services Board in

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Harrisburg, and we're a community partner to

Pitt's Autism Center of Excellence. They have an

NIH Grant right now for \$11.5 million studying

suicidality in autistic adults, which is higher

than the rest of the population. That's people

that are not in jail.

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Also a founding member of Allegheny County's Autism in the Courts Work Group protecting people -- might be somewhat familiar with here, with judges, DA's, PD reps, pretrial services, attorneys, and advocates since 2022. And over the past 30 years, I've handled dozens of cases of people with autism who fall into the system for really completely disability reasons. I have a crush on somebody. I text them 400 times, and I think that's flattery, but the justice system doesn't see it that way. And once I learn if I'm autistic, I can pretty much correct that. But when I'm in a jail, I just fall apart. And people can fall farther into the jail. I think I've worked with some people here before around those kind of questions.

I spent a lot of time in the jail.

I've watched the Jail Oversight Board for 18

months. I was afraid to come here because I was

afraid I might lose access to coming in to do
training, to be frank. That's a problem.

Hopefully not anymore, though. I trust you guys.

We need to do a better job.

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One in 36 people have autism. here to really talk about that we need to do a screening at Intake so that people like judges have information when people come before you, that you want to know something else might be going on, that people have a communication disorder, a social disability that can't speak for themselves. We can get -- I think we can lead nationwide if we go to the software provider, install -- there's free widgets you can get to put in an autism screening that self-scores. If we get that into our software provider, which I have actually talked to these people, we can have it impact the whole county. We can be the first one to do that and maybe step forward and be more in a leadership position than kind of playing catch-up with the terrible things that have happened in the past.

Autism is a medical condition.

It's not a choice. I have to say that a lot.

It's differences in brain structure and brain

growth and brain nerve development, and then it can't come and clear itself out all the time. People are very intelligent when they're autistic, but they can't always process quickly. It's like having that dial on your computer that's kind of rebooting every time something happens. They don't respond well in jail. They can't do fast commands. They will end up in hands-on kind of situations sometimes. might not be able to look at you because that activates their fear center, so that's why they can't look you in the eye. They'll look guilty, maybe coming in. People judge people by the cover, but we need to kind of get around that. If you know somebody is autistic, or might be, then we have a better chance of them having -not having their life fall apart.

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I've done this for 30 years, and
I'm a taxpayer, and I hate to see people end up
incarcerated. The people that I'm trying to help
are being harmed by systems everywhere. It's not
just us, but we can take leadership on this and
get ahead of it.

So I'm just here -- if I don't hit my three minutes to ask for a meeting with

anybody, group, I don't care, jail, you know, whoever wants to do that. I think I've met some of you guys over there.

People in the jail have said, like, I know what you're saying and how to treat people now, but I don't know who they are. How am I supposed to know? And I have not been able to answer that. And we've had four or five years of meetings before this. Run-around. I think we are offered -- if we could get volunteer medical students to come in 24/7 while people are waiting for fingerprints, maybe they'd be allowed to get screened for a medical disability. That's just not -- that's not adequate.

JUDGE EVASHAVIK DILUCENTE: My timer didn't go off, but --

MS. RANDALL: Oh, yes.

JUDGE EVASHAVIK DILUCENTE: But.

MS. RANDALL: That's because this is a really important -- so that was meant to be?

JUDGE EVASHAVIK DILUCENTE:

MS. RANDALL: And I'd like to meet with anybody. I brought cards. I'm going to pass them out to people. We just need to do well. Kids with autism grow up. And if I tell

	24
1	one more time in a I'm no fun at dinner
2	parties, if I say I work for adults who are
3	incarcerated with autism, people sit back and say
4	I never thought that that could happen. And we
5	don't know how many people there are. I can't do
6	diversion if I can't count people.
7	JUDGE BIGLEY: Are you involved
8	with the Supreme Court Initiative for Autism in
9	the Courts?
10	MS. RANDALL: With Justice
11	Dougherty?
12	JUDGE BIGLEY: Yes.
13	MS. RANDALL: Yeah, I've trained
14	with him. Yes. I do training statewide. I talk
15	about this all the time. It's.
16	JUDGE BIGLEY: Well, I appreciate
17	your work.
18	MS. RANDALL: I appreciate you
19	being here and that you're open to this.
20	JUDGE BIGLEY: Thank you very much.
21	MS. RANDALL: Thanks.
22	JUDGE EVASHAVIK DILUCENTE: Thank
23	you.
24	Marion Damick.
25	MS. DAMICK: Okay. Hello.

D-A-M-I-C-K. Marion.

I'm actually going to tell you about something good that's going on, which leads me to what I would like to advise. To have the first -- or someone report before we all start with the what is wrong, what needs to be repaired or redone, with what has been accomplished. I think if that were spread out or not -- depending on how the Board and the question -- it would help a great deal because otherwise, you're looking through this, and you really don't see everything that hopefully has been done.

There was one thing though very good from the -- from the new -- whoops, where is it, here. Medication treatment. That was in the newspaper, and it's something that should be, you know, made known around. Being in the newspaper probably did -- was way back -- well, in '24, January. And because of the -- what the current warden, acting warden has done, and that's good. Medic- -- it's an expansion of medicated assisted treatment program. Now, that should be something you want the people to know about, particularly, I would say, the individuals who are here who

have a vital interest in what's going on in the jail, as well as people in the community. But where are all the people who really are concerned -- I'm not, you know, who are able to get here? I'm sure there are people who aren't able to get here, unlike me, who would appreciate it too. But if you could do that every time, just put it on the top what we've done well. That's -- that would be perfect.

Also, there's one other good thing.

You don't have a female juvenile. Therefore, you don't need another dog or cat. So you don't have a juvenile. That's good for here. I don't know if you had something to do with it, but it was good.

Also, speaking of juvenile, I'm back to Shuman. Shuman is one of -- who should -- you're responsible for Shuman. Try to do something that will bring Shuman back so you don't have the 19 youth that you do have now in jail where they should be in Shuman getting that type of treatment probably better -- obviously better than what they did get because that's why it was closed, but you're responsible for it. So please take an interest in what's going on with

1 the youth.

2 JUDGE EVASHAVIK DILUCENTE: That's

3 three minutes.

MS. DAMICK: Because I'm sure you 4 5 saw this, but if you didn't, I can pass it 6 around. It tells what you did good. And I think 7 I'll be doing it. The one who mentions something 8 was done. But I think continue doing something 9 like that, and it would be very helpful. 10 maybe you have a few -- just a few people here 11 complaining. So wouldn't that be better? Let's 12 try it. New Year, try doing new work. Thank 13 you.

JUDGE EVASHAVIK DILUCENTE: Thank
you.

16 Stephen Fisher.

MR. FISHER: I yield my time.

18 Thank you.

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JUDGE EVASHAVIK DILUCENTE: Okay.

20 James Waters.

MR. WATERS: Hi. My name is James Waters, W-A-T-E-R-S. I'm here to talk about my son, Alex McGowan, who is currently in the Allegheny County Jail. He was arrested five months ago after his mother got a PFA on his

stepdad, and he had gone back to live with them, breaking up with his girlfriend. So he was there for two months. His mother had a PFA on his stepdad. He got home. His stepdad cuts him with a razor knife less than like an inch from his left eye. He actually required stitches, but Alex retaliated and struck him one time, and Alex ends up getting arrested. He goes to jail. They put a detainer on him because he's on probation. So he goes to court. They lower it to a summary, and the court wants him to go to outside drug and alcohol assessment and anger management, but he can't do this because he's still on the detainer.

 $\label{eq:continuous} \hbox{I think -- Ms. Hallam -- I think you}$ actually talked to my son on 4.

MS. HALLAM: Uh-huh.

MR. WATERS: Yeah. Well, he's currently on a hunger strike. He's on the medical floor, and if you're on medical, you can't get visits. You can't get mail. You can't make phone calls. He can't -- they have tablets. He can't use a tablet. And since he's on a hunger strike, they won't let him shower. I mean, how draconian is that? I mean, I just don't understand it.

But I'm worried for my son's life,
basically. I just have so much anxiety. I got a
call on Monday from the head of Probation and
Parole. Her name is Michelle Contas, basically
telling me that she's going to keep my son in
jail as long as she could because of the games
he's playing. I guess the game she means is like
refusing food and water.

I mean, it affected me so bad, I mean, I've had a knot in my stomach ever since. And the anxiety is too much, I mean.

So I can't even contact my son. I mean, he signed a waiver so I could find out his medical condition, but I have to believe what the jail tells me. I mean, I'm afraid I'm not going to see him alive again, basically. I mean, this woman has like a vendetta against my son, evidently. I mean, completely unhinged, she called me. I mean, I just don't understand what my son ever did to her.

JUDGE EVASHAVIK DILUCENTE: Sir -
MR. WATERS: He actually had a

bed at White Deer Run at the end of last month,

and naturally, he couldn't do it there either

because he still had the detainer. The

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1	judge denied him to go there. His probation	
2	officer wouldn't really help.	
3	JUDGE EVASHAVIK DILUCENTE: Sir,	
4	sir, sir, up here.	
5	MR. WATERS: Oh, I'm sorry.	
6	JUDGE EVASHAVIK DILUCENTE: Your	
7	time is up, and I apologize.	
8	MR. WATERS: All right.	
9	JUDGE EVASHAVIK DILUCENTE: But	
10	hang on a minute.	
11	JUDGE BIGLEY: It's impossible to	
12	deal with individual cases. I think that's	
13	the	
14	JUDGE EVASHAVIK DILUCENTE: This	
15	has nothing to do with the Jail Oversight Board,	
16	this detainer, and the judge not letting him out,	
17	okay? We can't address that, but what we might	
18	be able to answer is if your son is on the	
19	medical unit, is that accurate that he can't have	;
20	any contact with his dad and he doesn't have	
21	electronic devices? Can somebody answer that?	
22	JUDGE BIGLEY: Can I just say one	
23	other thing, I can say I Ms. Contas is not the	;
24	head of Probation and Parole. She's the State	
25	Probation she's the State Parole Liaison.	

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1	JUDGE EVASHAVIK DILUCENTE: Yes.	
2	JUDGE BIGLEY: So she's not an	
3	Allegheny County Probation Officer. She's the	
4	State Parole Liaison.	
5	JUDGE EVASHAVIK DILUCENTE: Yeah.	
6	But we can't address it regardless.	
7	JUDGE BIGLEY: Yeah. I just wanted	
8	to say that. I only know her name.	
9	JUDGE EVASHAVIK DILUCENTE: Okay.	
10	Can you all answer that?	
11	JUDGE BIGLEY: She's State Parole	
12	Liaison.	
13	MR. WATERS: Yeah, but	
14	JUDGE BIGLEY: I just wanted to say	
15	that.	
16	MR. WATERS: Okay.	
17	JUDGE BIGLEY: But I don't know	
18	this gentleman or his son, but can someone say	
19	what the restriction is on the medical floor?	
20	CHIEF DEPUTY BEASOM: Your Honor,	
21	we'll have to look to see where his current	
22	location is and any active	
23	JUDGE BIGLEY: But are there	
24	generally restrictions on the medical floor at	
25	all?	

1	32 CHIEF DEPUTY BEASOM: It would
2	depend it would depend on the individual and
3	the level of care that the provider has assigned
4	to that individual.
5	JUDGE BIGLEY: Can someone look
6	into it right away and let the probation or I
7	mean the Jail Oversight Board liaison know right
8	away?
9	CHIEF DEPUTY BEASOM: Yes, ma'am.
10	JUDGE BIGLEY: And Bethany, did he
11	say that you had some communication?
12	MS. HALLAM: Yeah. I went and saw
13	him in the jail and that's what I was going to
14	tell yinz. I will go see him again. I saw the
15	cut on his eye. I talked to him. He yeah, he
16	was very thin.
17	JUDGE BIGLEY: Was that a number of
18	days ago, or when was it?
19	MS. HALLAM: Oh, it was weeks ago.
20	JUDGE BIGLEY: Okay.
21	MS. HALLAM: Yeah, weeks ago. And
22	at that point, he was not doing well. But I can
23	promise you that I personally will go and put
24	eyes on him, and I will tell him that I saw you
25	here, and if you can somehow get me your contact

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1	information before the end of the meeting, I can
2	report back to you anything that he says to me.
3	And I'm so, so, so, sorry.
4	JUDGE BIGLEY: Sir, one other
5	thing and the other thing is if he's, in fact,
6	on a hunger strike, could somebody maybe make a
7	Behavioral Unit referral?
8	JUDGE EVASHAVIK DILUCENTE: A what
9	referral?
10	JUDGE BIGLEY: A Behavioral Unit
11	referral?
12	JUDGE EVASHAVIK DILUCENTE: Oh.
13	MS. HALLAM: What exactly is that
14	that you're asking for?
15	JUDGE BIGLEY: Maybe have a mental
16	health unit referral for him as well if he's not
17	eating or if he's depriving himself of nutrients.
18	And maybe he needs some mental health help as
19	well.
20	MS. HALLAM: Yeah. I'm going to go
21	check on him too, just to make sure because I'm
22	worried.
23	JUDGE BIGLEY: And that's do
24	that right away.
25	MS. HALLAM: Yeah. But I also

	34
1	don't think your question was answered, Judge
2	Bigley. Is there general restrictions on medical
3	pods?
4	JUDGE EVASHAVIK DILUCENTE: He said
5	it varied, is that correct? So it the medical
6	pod, it varies patient by patient, or defendant
7	by defendant as to whether there's restrictions?
8	CHIEF DEPUTY BEASOM: It would
9	depend on the condition and the level of
10	restriction that would be assigned by a provider.
11	If somebody is not mentally able to be moved to a
12	visit, then we would not allow those.
13	JUDGE EVASHAVIK DILUCENTE: Well,
14	why wouldn't they be allowed to have an iPad or a
15	shower?
16	CHIEF DEPUTY BEASOM: Well, again,
17	it would depend on the individual. They may be a
18	danger to themselves if we give them an iPad.
19	MS. HALLAM: What about the shower?
20	CHIEF DEPUTY BEASOM: Everybody is
21	offered a shower.
22	JUDGE BIGLEY: Hence the rea
23	hence my suggestion that you get a
24	JUDGE EVASHAVIK DILUCENTE: Report
25	to investigate this particular case, please, and

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1	report to the Jail Liaison the Oversight Board
2	liaison, and she will report back to us.
3	JUDGE BIGLEY: If there's a concern
4	that somebody shouldn't have an iPad, then they
5	should probably have an assessment.
6	CHIEF DEPUTY BEASOM: Understood.
7	JUDGE EVASHAVIK DILUCENTE: Okay.
8	JUDGE BIGLEY: And if he's not
9	eating, then maybe some concern that he needs
10	hospitalization or something. I don't know.
11	Something, obviously. Someone will look into it,
12	but what's your last name, sir?
13	MR. WATERS: My last name is
14	Waters.
15	JUDGE BIGLEY: What's your son's
16	last name?
17	MR. WATERS: McGowan.
18	JUDGE BIGLEY: McGowan?
19	MR. WATERS: Yeah.
20	JUDGE BIGLEY: M-C-G-O-W-A-N?
21	MR. WATERS: Yes, ma'am.
22	JUDGE BIGLEY: All right. Thank
23	you.
24	MS. HALLAM: One thing I will add
25	is in my experience, hunger strikes are not

	36
1	usually like mental health. It's more of a
2	political statement of trying to get it you
3	know, help.
4	JUDGE BIGLEY: No, I think
5	sometimes it is, but I think combined with some
6	of the things he's saying is making me concerned
7	that you know.
8	MS. HALLAM: Yeah.
9	JUDGE EVASHAVIK DILUCENTE: Okay.
10	We're going to look into it. Thank you, sir.
11	MS. HALLAM: And then can I just
12	say one last thing. Just for the record, there
13	is no blanket restrictions on people who are on
14	medical pods. No blanket restrictions. It is
15	all individualized.
16	CHIEF DEPUTY BEASOM: Do you mean
17	blanket as in all-encompassing?
18	JUDGE EVASHAVIK DILUCENTE: Yes.
19	CHIEF DEPUTY BEASOM: Or something
20	to cover yourself with? No, I'm asking.
21	Seriously.
22	JUDGE EVASHAVIK DILUCENTE: As in
23	all-encompassing, apply to everybody.
24	CHIEF DEPUTY BEASOM: No.
25	JUDGE EVASHAVIK DILUCENTE: Okay.

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1	CHIEF DEPUTY BEASOM: The medical
2	housing units, there may be dietary restrictions.
3	There could be movement restrictions, out-of-cell
4	activity, depending on depending on the
5	individual.
6	MS. HALLAM: But there are no
7	restrictions placed on everyone?
8	CHIEF DEPUTY BEASOM: No. Not that
9	I'm aware of.
10	JUDGE EVASHAVIK DILUCENTE: Okay.
11	Thank you. Thank you so much.
12	MR. WATERS: I thank you all so
13	much.
14	JUDGE BIGLEY: Thank you.
15	JUDGE EVASHAVIK DILUCENTE: John
16	Sonenday?
17	JUDGE BIGLEY: He's passing.
18	JUDGE EVASHAVIK DILUCENTE: Oh, oh.
19	Sorry.
20	JUDGE BIGLEY: That's okay.
21	JUDGE EVASHAVIK DILUCENTE: Darrell
22	Palmer.
23	MR. PALMER: Hello.
24	JUDGE EVASHAVIK DILUCENTE: Hi.
25	MS. HALLAM: Hi.

1 MR. PALMER: Darrell Palmer, 2 P-A-L-M-E-R. 3 I'm just here today for answers, 4 answers about the order of operations on special 5 need diets and religious diets in the ACJ, 6 answers about the surgery that was scheduled and 7 not done in almost a three-year span for me. 8 need to know if I can follow up and reschedule 9 this surgery that was planned, and if not, why 10 not? 11 I also need to know why no one has 12 reached out to me on my private e-mail in a 13 30-day span? 14 JUDGE EVASHAVIK DILUCENTE: 15 month, I had asked the jail to look into your

month, I had asked the jail to look into your case, so if you're comfortable with getting an answer in front of everybody --

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MR. PALMER: Yes, I am.

JUDGE EVASHAVIK DILUCENTE: I'll ask them. Okay. Did anybody look into this, and if so, what's the answer? This gentleman said last month that I believe he had had surgery scheduled several times. It was canceled, and that none of your dietary restrictions were acknowledged in jail.

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1	MR. PALMER: And when they were,	
2	they weren't followed.	
3	JUDGE EVASHAVIK DILUCENTE: Okay.	
4	Does anybody have an answer?	
5	DEPUTY WARDEN TOMA: Renee Madden,	
6	who was here last month, was like we don't	
7	have an answer to that.	
8	JUDGE EVASHAVIK DILUCENTE: Why	
9	not?	
10	DEPUTY WARDEN TOMA: I think we	
11	just dropped the ball on this one, Your Honor,	
12	where we assigned it to somebody, and the	
13	provider dropped the ball.	
14	MR. PALMER: Can you say that	
15	again?	
16	DEPUTY WARDEN TOMA: I will take	
17	full responsibility that we didn't follow through	
18	on this request, so we will own this one and	
19	we'll do a follow-up on it.	
20	MR. PALMER: Okay.	
21	JUDGE EVASHAVIK DILUCENTE: Okay.	
22	So who did you assign it to?	
23	DEPUTY WARDEN TOMA: I honestly,	
24	I would have to go back and review who we talked	
25	to after this meeting. I just don't have an	

1 answer for you. 2 JUDGE EVASHAVIK DILUCENTE: 3 Well, could you send an e-mail with the answer 4 rather than waiting until next month? If you 5 could look into this and send an e-mail to the entire Board, A, what are the circumstances 6 7 regarding this surgery, and why this was never 8 schedule --9 And I know you -- I don't have my 10 notes from last month. 11 MR. PALMER: I provided my e-mail 12 too. 13 JUDGE EVASHAVIK DILUCENTE: Okay. 14 Good. And B, what -- how does the jail 15 accommodate individual's specific dietary 16 restrictions? And would you mind telling us what 17 yours were, sir? 18 MR. PALMER: It was a non-solid 19 high-fiber diet. 20 JUDGE EVASHAVIK DILUCENTE: 21 Non-solid, high-fiber diet. And you were not 22 given that diet?

> 44 days to finally get it approved, and then when I got it approved, 78 percent of the time it was

MR. PALMER: And when I -- it took

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41 1 not followed. 2 JUDGE EVASHAVIK DILUCENTE: Okay. 3 All right. So -- go ahead. 4 MS. HALLAM: If you don't mind, if 5 I could ask a follow-up to that. When you say 6 that it wasn't followed, were you given some 7 other kind of restrictive diet in that place, or 8 were you given the meal that everybody else 9 received for your meals? 10 MR. PALMER: It would be worse than 11 the other meals other people received like -- I 12 would say non-solid, high-fiber, and I would open 13 it up, and it would be just like potatoes. 14 MS. HALLAM: Thank you. 15 JUDGE EVASHAVIK DILUCENTE: 16 was different, but it wasn't --17 MR. PALMER: Right. 18 JUDGE EVASHAVIK DILUCENTE: -- what 19 you were supposed to get? 20 MR. PALMER: Potatoes. 21 JUDGE EVASHAVIK DILUCENTE: A11 22 right. Thank you, sir. We're going to -- we 23 tried to get an answer, but this time, we're 24 going to get one. Okay?

Okay.

MR. PALMER:

1	42 JUDGE EVASHAVIK DILUCENTE: All
2	right. Thank you.
3	MR. PALMER: And again, I provided
4	my e-mail.
5	JUDGE EVASHAVIK DILUCENTE: I have
6	it. Thank you.
7	Brian Englert.
8	MR. ENGLERT: My name is Brian
9	Englert. I just first want to ask Warden Dady or
10	any of the other deputy wardens, am I allowed to
11	be here today, or do you want to have the
12	Sheriffs remove me?
13	JUDGE BIGLEY: Sir. Sir.
14	MR. ENGLERT: Because Thursday, we
15	had
16	JUDGE BIGLEY: Sir, if we if
17	this a Public Comment, you can direct
18	MR. ENGLERT: Yeah, it's a public
19	comment. No.
20	JUDGE BIGLEY: Can you direct it to
21	the Board, please?
22	MR. ENGLERT: Sure.
23	JUDGE BIGLEY: Thank you.
24	MR. ENGLERT: So I actually want to
25	direct this towards the new County Executive.

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1	I'm President of the Union at the jail, and we
2	had Step 3 Grievance meetings Tuesday, and the
3	County Manager and the County Assistant Solicitor
4	decided that since I'm suspended from work, that
5	I'm also, I guess, suspended as Union President,
6	and I am not allowed to participate in
7	representing my people.
8	JUDGE EVASHAVIK DILUCENTE: Okay.
9	Sir, this does not pertain to the Jail Oversight
10	Board.
11	MR. ENGLERT: Well, actually,
12	here's one way it actually does pertain because I
13	have reached out to Ms. Immamorato's Chief of
14	Staff. I have no answer. But I'll divert from
15	that.
16	Besides the fact that this is clear
17	union busting, which I under Fitzgerald and
18	all of them, I I mean, these guys said hold my
19	beer. We'll show you union busting.
20	But if you won't let me talk about
21	that, that's fine.
22	JUDGE EVASHAVIK DILUCENTE: It's
23	not that. It's that we don't have jurisdiction
24	over that issue.
25	MR. ENGLERT: But the County

1 Executive is right there.

JUDGE EVASHAVIK DILUCENTE: We're the wrong Board to bring this issue to. And I'm sure that the County Executive could talk about 100 different topics.

MR. ENGLERT: Sure.

JUDGE EVASHAVIK DILUCENTE: But we're not going to let 100 different people come in and bring up 100 different topics that have nothing to do with this Board.

MR. ENGLERT: Then I'll reclaim my time and I'll talk about two things then -
JUDGE EVASHAVIK DILUCENTE: Okay.

Go ahead.

MR. ENGLERT: -- that are Jail Board related.

First of all, I've been at that

jail for 13 years. You mean to tell me that the

second in command of the second-largest county

jail in Pennsylvania doesn't know the

restrictions on the Mental Health Units? You

mean to tell me they have no freaking clue? When

you're the second in command of the second

largest county jail in America, and it's

acceptable for them to not have an answer? I

could tell you I made one phone call. That inmate is located on 5-C, the Mental Health Unit. So you might want to ask Chief Beasom what the restrictions are for tablet use is on 5-C, the Mental Health Unit. I handled that in one phone call. They have no respect for anybody up here on this Board. They show up every month with no answers. I was a witness to that man's trying to get his tray every month. I called sergeants. called captains. They'd send up a tray full of applesauce for this quy. His hernia looked like a baby arm sticking out of his stomach. Like a baby arm. And I'm sure he would show you right now. Like a baby arm sticking out of his stomach.

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I would spend my lunch hour trying to get his food situation rectified. They could have brought his scrambled eggs. They could have brought his shredded chicken. They could have brought him rice. A whole entire tray of applesauce was given to this man. I spent my time advocating for this man, which is part of my job as a correction officer to ensure we met his needs, and they were never met. So I will vouch for everything he said.

JUDGE EVASHAVIK DILUCENTE: Well,

who did you go to? Why --

MR. ENGLERT: So we have a chain of command. The first thing I did was called the kitchen. Well, he's getting exactly what he's getting on his tray. Well, they have a dietician. You mean to tell me a dietician signed off on that man to get a whole container of applesauce with no protein? Get out of here.

Then I went to my sergeants. Then
I went to my captain. Captain Pennell came up
and spoke with him, looked at his hernia sticking
out of his stomach like a baby's arm, and nothing
still happened.

So I just want to remind you that these people that you have running your jail have at least 6, 7, 8 years of experience in that jail, and they should -- you mean to tell me that nobody gets a daily report of how many inmates are on a hunger strike? How many could there be?

Warden Dady, how many people are on a hunger strike at the jail? Answer that question for them? How many people are on a hunger strike that you can't answer that question? It's because nobody up there holds

47 1 them accountable. 2 And I can tell you right now, in 3 that jail, you have a morale issue with the officers. You have a morale issue. 4 5 JUDGE BIGLEY: Isn't his time up? 6 MR. ENGLERT: And when you don't 7 allow the union to represent them, that's union 8 busting. And it never happened under Fitzgerald. 9 I'm surprised it happened under you, Ms. 10 Innamorato. 11 JUDGE EVASHAVIK DILUCENTE: Okay, 12 thank you, sir. 13 Jim Reed. Jim Reed. 14 MR. REED: I just signed in. 15 That's for public MS. HALLAM: 16 comment. But if you don't want it, you can just 17 not. 18 MR. REED: I'm sorry. 19 JUDGE EVASHAVIK DILUCENTE: 20 okay. 21 MS. HALLAM: Don't apologize. 22 JUDGE EVASHAVIK DILUCENTE: Diana 23 Hull.

MS. HALLAM: Thank you for being

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here, Mr. Reed.

MR. REED: My pleasure.

 $\mbox{MS. HULL: Good afternoon. My name} \\ \mbox{is Diana Hull, H-U-L-L.}$

I'm from the Pennsylvania

Interfaith Impact Network, and I would like to welcome the new members of the Board. And I'm gratified to see the backgrounds, even though some of them are not quite here yet, and I'm gratified to see the variety of the backgrounds of the members as well as feeling the sense of purpose to improve the conditions for the residents at ACJ. So I thank you.

Our commitment at PIIN is to work with stakeholders and our allied organizations to provide quality medical and mental health care and to increase the number of programs designed to help all residents of the ACJ to be able to reintegrate back into their families as well as their communities.

It is our collective duty to all those who are under our care at the ACJ. The County Council and the JOB are collective representatives in this work, and while the JOB is not directly responsible for who ends up in jail, we do have two judges here. So I would

like to point out an idea that I heard just last Sunday. By sending fewer people to prison and for shorter times, it would really help to reduce recidivism, and it was stated by the head director of the Federal Prisons on 60 Minutes. So if you haven't seen it, it's interesting.

Many of the people in this prison
waiting for a hearing should not be there. They
should be with their families or continuing to
work until their hearing is given a date. We
need programs like Colorful Backgrounds,
Allegheny County Health and Human Services,
Reimagine Reentry, and funds to help train and
prepare returning citizens.

It would be terrific if people waiting for a hearing at the ACJ or the Renewal Center to have appropriate information and to be able to vote. We need more computer translators -- actually, people translators because dictionaries simply don't cut it.

PIIN also is committed to supporting the medical and correctional staff by encouraging the County to provide adequate training, mental health care, and improving the working conditions so that we can provide quality

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1	50 personnel to take care of all the residents at
2	ACJ.
3	Thank you.
4	JUDGE EVASHAVIK DILUCENTE: Thank
5	you.
6	MS. HALLAM: Thank you.
7	JUDGE EVASHAVIK DILUCENTE: Barbara
8	Finch.
9	MS. FINCH: Sister Barbara Finch,
10	F-I-N-C-H. Good afternoon. I spoke before you
11	last month. I would like to start today where I
12	ended last month. This is a new year, and we
13	must keep our New Year's Resolution to work
14	together to improve the conditions at ACJ. It
15	will literally take a village for true justice to
16	exist.
17	Congratulations to all of you who
18	sit on this Board, and Sara, congratulations to
19	the people that you have nominated. Each of your
20	professional gifts are important, but there is
21	someone glaringly missing. No one has medical,
22	mental health expertise.
23	That's not three minutes already?
24	JUDGE EVASHAVIK DILUCENTE: Go
25	ahead.

MS. FINCH: It is well documented that many of the deficiencies center around medical and mental health issues. As PIIN, we recommend that there should be a medical and mental health advisory committee established.

Together with you, the committee would explore the following: The possibility of the whole medical department connected to one of the city's health systems for oversight. You recall that Allegheny Health Network is only -- only oversees the physicians and nurse practitioners.

The Medical Director should actually be an MD empowered to make medical decisions. Fully staff mental health personnel, improve pharmacy and med-pass methods, laboratory services improved, availability of women's health services, compassionate care of LGBTQIA+ individuals, improve care of those going through withdrawal, improve methods of responding to sick call needs, emergency response improved, end violation of solitary confinement regulation, improve nutrition, improve chronic and terminal care, better preparation for release, increase openness to volunteers providing services, allowing area professionals in training to come

52 1 in and learn correctional health. And as I stated before, when 2 3 individuals are incarcerated and unable to pursue 4 their own care, we are morally and legally 5 responsible for them. 6 Lastly, the County must work to 7 offer acceptable contracts that support the 8 well-being of our staff, to retain them, to help 9 them to grow. And I'm just severely dismayed to 10 know that right now, that there is no new 11 contract for the employees in the Medical 12 Department. And what is offered is not 13 supporting them and their needs. 14 And lastly, I would just say, I'm 15 personally offering to help in any way I can so 16 that ultimate care can happen at ACJ. 17 Thank you. 18 JUDGE EVASHAVIK DILUCENTE: Thank 19 you. 20 MS. INNAMORATO: Thank you, 21 Barbara. 22 JUDGE EVASHAVIK DILUCENTE: 23 John Kenstowicz. 24

53 1 JUDGE EVASHAVIK DILUCENTE: Oh, 2 sorry. I apologize. 3 MS. INNAMORATO: No, thank you, 4 Sister Finch, for that. That is a, you know, an 5 idea that we will be discussing as a Board of 6 creating that subcommittee, so we hope to have 7 updates for the next meeting once we're at full 8 complement and County Council approves our 9 nominees. 10 So thank you. 11 MR. KENSTOWICZ: Hi, my name is 12 John Kenstowicz, K-E-N-S-T-O-W-I-C-Z. I'm also 13 talking for PIIN. 14 I want to talk about exit 15 interviews. I think we all know that we have a 16 staffing crisis at our jail. Exit interviews 17 will help us know why so many people have left 18 their employment at ACJ. 19 Our Jail Board voted in December of 20 2020 to conduct exit interviews, and at this 21 point, I believe only five exit interviews have 22 been done in over three years. 23 The Board has never conducted an 24 exit interview with a correctional officer.

want to repeat that. The Board has never

conducted an exit interview with a correctional officer over a time span of three years. Why is that the case?

Our Controller's Audit found that we are in need of 100 more officers. If we wanted more out-of-cell time for our residents, our healthcare staff to feel safe, and the JOB being able to provide the many services that it needs to provide, we need more officers. We need to know why so many officers have left. From our Job Satisfaction Survey, it was clear that the amount of CO forced overtime was a critical factor.

I would like to ask the Board if the Board receives monthly updates regarding this critical statistic and if the Board has a strategy to support the jail administration and frontline staff to decrease this amount of forced overtime? How many officers are forced to work 60, 70 or 80 hours a week?

Returning to the exit interview issue. With a new JOB and new leadership of the jail, my hopes are high that we can significantly improve the frequency the Board completes exit interviews with correctional officers and

healthcare staff. How can that be done?

I've done quite a lot of research on this issue, and I think most HR people would say that successfully conducting exit interviews comes down to two factors, trust and a belief that something will be done. Typical negative verbal responses I have heard are, I don't want to burn my bridges, and what good is it going to do?

From both of our Job Satisfaction
Surveys, we found numerous statements about the
threat of reprisal for speaking out or refusing
to do something which violates licensure. This
atmosphere of threat of reprisal needs to change
to give the exiting staff an experience working
at the jail that is not based in fear and
distrust.

The Board is often going into the jail attempting to build a relationship with frontline staff, talking in private and valuing what staff are saying will also build that trust. Our JOB can extend their hand and at a JOB meeting like this, invite exiting staff or staff who have already left to participate in an exit interview.

1	56 Can I just finish two more	
2	sentences?	
3	JUDGE EVASHAVIK DILUCENTE: Go	
4	ahead.	
5	MR. KENSTOWICZ: Our Warden joining	
6	hands and making it known through a system-wide	
7	e-mail that he welcomes the exiting staff to	
8	participate in JOB exit interviews will help very	
9	much. Both invitations need to be to include	
10	the person's identity will be protected.	
11	Regarding the second question of	
12	what will the interview accomplish, there is a	
13	word of mouth in the jail culture that will come	
14	to that conclusion.	
15	Thank you.	
16	JUDGE EVASHAVIK DILUCENTE: Thank	
17	you.	
18	C.J. Swanson.	
19	MS. SWANSON: Hello. My name is	
20	C.J. Swanson, S-W-A-N-S-O-N, and I'm an intern	
21	with PIIN.	
22	We are here because the residents	
23	of the Allegheny County Jail continue to die.	
24	We, as the Pennsylvania Interfaith Impact Network	
25	are called to fight against this injustice	

because every human life is a holy gift. We have continued to speak out about the needs of the staff because the staff are the people directly caring for the residents, and to lower the death rate, we must improve this care.

There has been a deep rift in the trust between the staff and the jail administration and Oversight Board. Staff members have been asked to perform tasks that violate their licensure. Staff have had to work excruciating overtime. What can the Board and the jail administration do to properly support the staff not only to improve the care being provided to the residents, but also to create an environment where newly hired staff will stay?

The lack of staff and high staff turnover rates are serious contributing factors to the high death rate at the ACJ and the dangerous conditions that residents continue to have to live with every day.

John spoke to the importance of exit interviews -- which will help these issues in multiple ways -- through consistently providing them, not only will you, the Board, gain better understanding of the happenings at

the jail, you will hear the firsthand experiences of the people who were there on-site every day.

You will gain knowledge that can both be used to make improvements for staff and residents but can also be used to create better offers for incoming staff.

Are you willing to sacrifice your time and listen to the leaving staff. Your actions will show that you are committed to making this jail better and begin to build the trust that has to be to create an environment that will lower the staff turnover.

Of course, nobody's retelling will better show you what's happening at the jail than going there yourself, and we implore you to go.

Go to the jail. Speak to the residents. Build relationships with the staff, please.

No matter what, being incarcerated is a traumatic experience. Incarceration strips people of their humanity and their dignity. But that is not a reason to accept the injustice in our system. It is the reason to fight to make conditions the best that they can be.

Thank you very much.

JUDGE EVASHAVIK DILUCENTE: Thank

you.

2 | Sharon Bonavoglia.

3 MS. BONAVOGLIA: Very good.

4 JUDGE EVASHAVIK DILUCENTE: I

5 remembered you said silent G.

MS. BONAVOGLIA: My name is Sharon Bonavoglia, B-O-N-A-V-O silent G, L-I-A, and I also am speaking on behalf of PIIN.

I'd like to start by thanking

Interim Warden Dady for being willing to meet
with PIIN, and we are looking forward to that
meeting next week.

The fewer people in jail, the fewer people will die there. My friend,

Shane Phillips, who gave me permission to use his name, spent four months in the ACJ last year, and then all the charges against him were dropped,

but only after he had shown up for these three separate hearings, each of which had a different DA and none of which the officers involved showed up.

He owns a small landscaping property management company and was unable to work from May through August last year, the prime working months for any landscaper. His very

pregnant girlfriend did her best to do that work and also delivered their daughter four weeks early, perhaps in part because of the stress of his incarceration and the physical labor she performed day after day.

Shane was accountable for showing up to all those hearings, but the officers were not. They were given three strikes before a judge finally said, you're out. Shane's initial arrest, including a beating by the police officers that left him with a permanent eye injury.

There is body cam footage from that arrest that I have not seen. I did see a photograph of his beating and bruised face after the fact. It occurs to me that the police didn't show up because of that footage, and DA Zappala's office kept reassigning the cases to different DAs so that they could slow the wheels of justice by saying they needed more time to ready the cases, which is exactly what I witnessed at the last two hearings.

This, then, could potentially make it less likely that Mr. Phillips would be able to sue the Pittsburgh Police. Deciding to pursue

justice for the wrongdoing of the Pittsburgh
Police is its own gauntlet of emotional stress,
and that decision is up to Mr. Phillips.

DA Zappala's office had the ability to pursue justice several years immediately following his initial arrest.

At the beginning of Black History Month, when we celebrate the accomplishments of black leaders in our history, I will also state that based on the pond scum of systemic racism that we all inhabit, Shane Phillips, Jr. would have not been arrested, nor assaulted, nor charged if he had not been a black man -- if he had been a white man instead.

outside the purview of the JOB. However, there are two judges sitting here now who have the influence in your own courtrooms, with your own colleagues in this regard for anyone in front of our court. I am hopeful that your time on this Board will encourage you to make a difference in the amount of time so many languish in the ACJ when they could be enlivening their own communities. What is under your purview is that Shane gained 30 pounds in part due to his lack of

time out of his jail cell and his ongoing mental health needs that were barely addressed while in the jail.

I hear that significant changes are underway in mental health treatment, and we at PIIN and the entire APA Coalition are looking forward to hearing more about those plans.

Now, please, turn off your timer, and I invite all of those able to stand out of respect for the reading of the names of those who have died since April of 2020. In this month, when we also celebrate love around the world, let us remember the loved ones who are missing these dear souls.

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, Tim Manino,

Douglas Bonomo, Zachary Sahm, Nicole Baruffi and

Richard Sciubba, II.

JUDGE EVASHAVIK DILUCENTE: Kyna

James. Kyna.

MR. JAMES: Yes. Hi everybody. My name is Kyna James. Last name is J-A-M-E-S.

I missed last month's meeting, just coming back to work after injury, but really, I'm just here, you know, to welcome the new Board members. And we, as APA Coalition, which is made up of about 30 organizations, we will, like, actually like to meet with you, County Executive Sara Innamorato. President Judge, do not kill me if I butcher your name. I swear, I've been practicing for so long. It's like Evashavik?

JUDGE EVASHAVIK DILUCENTE: That's right.

MR. JAMES: Yes. And Interim
Warden Dady as well. Unfortunately, over the
last few years, we haven't had an opportunity to
meet with the Board because they refused. We met
with Bethany often. We've talked to Corey, you
know, but we do do a lot of work when it comes to
the jail. You know, our coalition is made up of
organizations from all walks of life, the Jewish
community, the faith-based community, Black-led
organizations, LGBTQ, Lion X. I could go on.

But in 2021, we passed the solitary

64 1 confinement ban, which was grossly violated by 2 the last administration. We also have a hotline 3 at the jail that anybody who is incarcerated can 4 call us at for free, which is (412) 708-5200. 5 do get a lot of phone calls. We have a lot of 6 complaints for the month of January you can say. 7 And one thing I am is hopeful, 8 which I have not been with the Jail Oversight 9 Board in a long time. And you know, we just want 10 to work together to fix things. You know, we're 11 getting some inside information, and, you know, I 12 think that we can take the work we're doing and 13 combine it with the work you're doing and make 14 the jail a better place. 15 Thank you. 16 Thank JUDGE EVASHAVIK DILUCENTE: 17 you. 18 Brian Englert. 19 AUDIENCE MEMBER: He's already 20 gone. 21 JUDGE EVASHAVIK DILUCENTE: Oh, 22 Tanisha Long. sorry. Mr. Englert, you signed up on both 23 24 sheets.

MR. KENSTOWICZ: I just signed him up

on the wrong one.

MS. LONG: Tanisha Long, L-O-N-G.

Before I start, I do want to do a quick aside and say that when they say that they don't have blanket restrictions based on your mental health tier status or your status in the medical pod, that's untrue. And I actually look back on the meeting minutes. They said it in July, where they broke down how those were -- how those mental health tiers were handled in regards to restrictions on visits, phone calls, and contact with their family. So from their own words, that's not true, and you can look in the July meeting minutes for that.

Anyways, a few months ago, I had asked Warden Dady why his officers cannot seem to keep their hands off people, and this was a problem we had with Warden Orlando Harper, where the correctional officers have placed people in states of, you know, mental health trauma, physical trauma, and in this case, brain swelling, fluid on the brain, cardiac arrest, and sepsis.

An assault on an incarcerated individual by one of -- by several COs led to

this man's hospitalization. We don't know what came of that man after. We do know he did not pass away, but no one, and I mean no one, has the right to treat anyone like that.

And things are not different under Warden Dady than they were under Warden Harper because the same things have happened. He's been in charge since October, and since October, on at least three instances, we've had people reach out, and we've investigated incidents where people have been physically handled by COs in such a way that it has compromised their physical health and safety to a point that they had to be hospitalized. That's not okay.

And I understand that Warden Dady is only an interim warden, and, you know, I appreciate the fact that County Woman -- County Executive Innamorato is taking her time with this warden search, so it's intentional, but in your time here, you owe it to the people in the jail to make sure that they not only leave alive but they leave in a better state than what they came in.

We claim that these jails are meant for rehabilitation, that people there are waiting

their time in front of a judge, but during that time, why are they getting worse, and why have you done nothing to check the actions of your corrections officers? They're bringing in drugs. They're beating up incarcerated people. None of this is okay. And that man very much could have died, and it would have been another name that Sharon would have been reading now, and we wouldn't find out about it until far later.

Transparency is an issue. And one of the things I'm asking is that Use of Force incidents in the jail be investigated by a third-party, because it's very clear that the jail is incapable of providing the relief, the transparency, and the insight that the public and the people who are facing these issues need.

And there's an issue with your grievance process as well. People file grievances, and they file grievances, and the grievances go unanswered, or they're dismissed, and they're unable to get copies of those grievances after they leave the jail. So they don't have a paper trail of what happened to them, and the only way we can account of what happened to them is if they come here and they

1 tell us and they beg you for answers. This isn't
2 okay.
3 And one of the changes I'm asking

for, we need third-party investigation into these use of force incidents, and we need -- we need the warden to act, not as an interim warden, but like someone who is invested in the jail.

Thank you.

you.

JUDGE EVASHAVIK DILUCENTE: Thank

Roy Blankenship.

MR. BLANKENSHIP: Okay. My name is Roy Edward Blankenship, Jr. I'm community organizer with BPEP, the Black Political Empowerment Project. And I'm going to read a statement that we -- that BPEP had prepared for the Board.

I'm spending all my time looking for the document. Okay.

Okay. It goes: To the Honorable

Members of the Allegheny County Oversight Board.

We at BPEP, the Black Political Empowerment

Project, have read and reviewed and discussed the

RAND Corporation's executive summary on creating

a path to repair racial disparities in the

criminal justice system of Allegheny County.

Now, for those of you that might not be familiar, this was a study that was created for more or less county-wide, but also, upon reading it, there were overlaps where it applied also to the actual Jail Oversight Board and to policy creation. We at BPEP would like to concur with its findings of fact which the actual letter are here and the surveys sent to you guys.

Facts of Finding in stating that we agree with the executive summary in its entirety. We are asking that the Honorable Members of this Board utilize this executive summary as a key guy to implement changes to the policies and operations of the Allegheny County Jail and to the sections of this summary that pertain to the current disparities and policies and operations, past and present, which currently disparities are still happening within the Allegheny County Jail.

We at BPEP have spoken count- -spent countless hours with residents and partners
discussing and advocating for change in the
policies, operating procedures, and lack of
respect for the quality of life given to those

who happen to find themselves incarcerated in the Allegheny County Jail and state now that -- and state that now is the time for action. We have a new Board, a lot of new faces that I do see here representing and possibly to come and join the Board. You are all candidates that have worked well for the public and continue to serve the public's interests, and I feel that there shouldn't be a reason why you can't move further with representing the community.

The Allegheny County Jail and state now is the time for action. Upon examination of the racial disparity --

your three minutes is up. I would ask
everybody -- I don't like interrupting people,
but we do have a rule for three minutes, and
almost everybody goes over it and ignores the
timer. I hate to interrupt you. I would ask
that you be respectful of your time allotment
going forward. Do you want to conclude, sir?

MR. BLANKENSHIP: Yes, I would like
to.

JUDGE EVASHAVIK DILUCENTE: Okay.

MR. BLANKENSHIP: Thank you very

much. See, those are the little nuances that I'm talking about. Mom here is our resident expert on the Jail Oversight Board. She has more time put in here than half of our life spans in here.

So what I'm trying to say is that there are tools that have been created. Many of you, Bethany, Corey, Mr. Kraus, Sara, your work prior to -- Your Honor, I haven't gotten the chance to meet you, but Judge Bigley, one way or another, you all served our county and worked with our residents. You understand what we have here, and you understand our past, and you also now have a chance to affect the future. People are sitting in here asking you to protect other's constitutional rights, which was jobs that you all been on top of already.

So thank you.

JUDGE EVASHAVIK DILUCENTE: Thank

20 you.

21 Alan Guenther.

MR. GUENTHER: Hi. Nice to see you again. And just before I start, I just wanted to ask where are the new public members? They were approved by the Council?

MS. HALLAM: No. We didn't approve them yet. So we affirmatively recommended all three of them at the Appointment Review Committee Meeting this week, but they need to be approved by the full Council this coming Tuesday. And it will take effect immediately upon approval. So hopefully, as of Tuesday evening, we will have them, and they will all be here for the next month's meeting.

MR. GUENTHER: That's great. Thank you.

MS. HALLAM: Yeah.

MR. GUENTHER: All right. I'm Alan Guenther. It's G-U-E-N-T-H-E-R. I'm with the Pittsburgh Quakers, and the Pittsburgh Peace is Possible Coalition.

One thing I'd like to say is it's just so refreshing you're responding to the audience. People are asking questions about their children who are on hunger strikes or their relatives. So it's great that you're volunteering, for example, Bethany, to stand up and go in and see this person specifically, but there are a lot of questions raised, good questions raised by members of the audience.

And as part of your new attitude 2 and responsiveness I have this question for you. 3 Whose job is it to respond to the public when the public asks you a question? Who follows up? says, hey, can we have more details on it and who 6 provides an answer? Now, I don't know -- I don't know 8 the situation with the County Jail spokesperson.

Maybe that's somebody who can respond to the public if it's someone you trust. And the thing is though, if you have people who raise responsible questions, someone -- and it shouldn't just be Board members, you know, volunteering and going above and beyond what they're expected to do. Somebody should work with you and reach out to them and provide an answer and make them feel that you care about what they're saying. You started, but that's a next logical step.

20 Thank you.

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21 JUDGE EVASHAVIK DILUCENTE: Thank 22 you.

Okay. We've concluded the public comments.

25 Has everybody reviewed the meeting

74 1 minutes for Thursday, December 7? MS. HALLAM: Motion to approve the 2 3 meeting minutes. 4 JUDGE EVASHAVIK DILUCENTE: Ιs 5 there a second? MS. INNAMORATO: I'll second. 6 7 JUDGE EVASHAVIK DILUCENTE: All in 8 favor? 9 (Chorus of ayes.) 10 JUDGE EVASHAVIK DILUCENTE: 11 opposed? 12 (No response.) 13 JUDGE EVASHAVIK DILUCENTE: Motion 14 carries. 15 The Warden's Report. 16 WARDEN'S REPORT 17 INTERIM WARDEN DADY: Good 18 afternoon, Board. I'd like to start off by 19 reviewing the documents requested, the questions 20 that were raised at the last Oversight Board 21 meeting. 22 The following documents were 23 e-mailed to the Board last Friday. It's a 24 Medical Exemption Request Form, Medical Mental 25 Health Segregation Clearance Form, Emergency

Contact Form, settlement between the DOJ and Allegheny County, and then it was highlighted for the answer of the question that was raised.

Healthcare employees hiring incentive program was sent and the book rejection communication was also sent.

The Use of Force and the Disciplinary Housing Policies have been requested, but again, due to these documents containing detailed information about the protocols, it could create a safety and security concern. We are committed to reviewing all of our policies to see which ones we can post publicly. We have reviewed our Advanced Directives Policy and are currently working with the Law Department to see if we can post that without compromising the safety and security again.

All Jail Oversight Board members are welcome to view the policy in full at the jail or at another prearranged secure location.

Likewise, the additional details about lockdowns and segregation housing are available at the jail. But after conversation with the Law Department, we're just unable to

provide the details, or more details in the public forum. This is due to both, again, the safety and security concerns, as well as ensuring that HIPAA laws are not being violated.

We remain compliant with Chapter 205 Referendum as indicated by the monthly report that we posted on February 5th.

The NCCHC is returning to the facility in a couple of weeks here, later in the month, to review the final two in-custody deaths that occurred in 2023. They will conduct the Annual Comprehensive Review. The jail's internal mortality reviews will be part of the NCCHC Comprehensive Review.

The NCCHC is willing again to address the Board in executive session regarding the 2023 Comprehensive Review, including all unredacted reports, when that process is completed.

The NCCHC CEO has spoken highly of the cooperation and effort from the jail administration and healthcare staff in this process. We will continue to engage with NCCHC in our pursuit of accreditation, and the organization will continue to perform annual

mortality reviews.

Due to PREA regulations, males and females are housed and attend programming separately from each other inside correction facilities. This includes juveniles and Deputy Clark will further address that in the Deputy Warden's report.

We also engage with the courts to see if they were able to add pre-booking -- the pre-booking time to the court's version of the OMSE database. Court administration was able to integrate data from the ASAP database system to reflect the time individuals physically arrive to the jail. That process went into effect today.

Regarding release time, we want to ensure we are releasing individuals safely and responsibly, and for that reason, it can take up to 48 hours for an individual to be released once the jail receives the paperwork from the courts. This includes ensuring that an individual is released with the proper supply of medication and that each individual is checked in the National Crime Information Center Database to ensure that they have no detainers or outstanding charges in other states, both of which takes some time to

complete.

We continue to work with the

Department of Human Services, Probation, Parole,
and the Courts to determine how processes can be
improved, or additional services can be offered
in the facility. Specifically, we are looking at
ways to offer additional mental health supports
for both the incarcerated population and the
staff.

That concludes my report, and I'll now turn it over to Chief Beasom for the Deputy Warden's Report.

DEPUTY WARDEN'S REPORT

CHIEF DEPUTY BEASOM: Thank you, sir. Good evening, Board.

The staffing update. We've had three promotions since the last Board meeting.

Paul Romanelli was promoted to the rank of Captain. Tamara Harris was promoted to the position of Reentry Services Coordinator Supervisor, and Brandon Watt will begin his new position as the Discharge and Release Lead.

Our current cadet class consists of 18 correction officer candidates who are scheduled to graduate on Friday, February 16th.

And our next academy class will begin on Monday, March 25th.

Inmates currently waiting transfer to the PA Department of Corrections, we have 7 males, 1 female with 300 Bs; 3 males, zero females with detainers; and 7 males, zero females with open cases. The longest wait time on a 300 B was received December 22nd, and the shortest wait time is from January 17th.

Number of federal inmates in the ACJ is 23, 15 of which are United States Marshal holds, and 8 are federal transfers for Allegheny County Court.

Use of Force numbers for January of 2024 was 41.

Last month, we were asked a question regarding a broken window on the south side of the facility. Facilities Maintenance reported that the window was not broken but it was allowing water intrusion. The window was removed to reseal it and the window was then reinstalled.

Finally, I would like to announce that LPN Christine Seely and Senior ID Technician Jessica Bradinger have been named the ACJ

DEPUTY WARDEN CLARK: Good evening,Board.

Chaplaincy and Prerelease. The Foundation of Hope is preparing for the upcoming holidays of Ramadan, Lent, Easter and Passover.

On January 11th the Hope program held graduation for 14 participants who successfully completed Hope. Everyone on the pod was eligible to participate in the celebration. We would like to congratulate those graduates on their accomplishments.

Discharge and Release. The

Discharge and Release Center assessed 362

individuals and distributed 63 boxes of Narcan,

134 Fentanyl and Xylazine test strips, 754

condoms and dental dams, and 454 bus tickets in

the month of January. The DRC continues to make

referrals and connect individuals to services in

the community.

Contact Visits. The jail is continuing to host contact visits for juveniles,

incarcerated workers, veterans, and program participants on designated Saturdays throughout the month. For the month of January, a total of 77 incarcerated individuals received contact visits from a total of 147 family members.

Residential Placement Services.

Based on orders from the Courts, Residential

Placement Services facilitated the transfer of 63

individuals to alternative housing in January,

and 25 individuals to substance use treatment

through the Diversion Program. The Diversion

Program received 40 new referrals and served a

total of 80 participants in January.

The Medical Assistance Program assisted a total of 105 individuals with completing Medical Assistance applications upon release from the jail in January.

Reentry Services. On January 11th, the jail began offering a new program called FREE. FREE stands for Foundation of Realistic Employment and Education. It is a cognitive behavioral therapy approach to employment intervention. It aims to help individuals to assist -- assess their current skills in order to explore educational and employment opportunities

and identify smart goals. The program covers legal requirements for employment, workplace values and communication skills. It concludes with a job readiness assessment and mentoring support.

teams have implemented the ORAS risk assessment tool. ORAS stands for the Ohio Risk Assessment System. This assessment tool helps to predict recidivism at multiple points in the criminal justice system. It also helps to identify dynamic risk factors that can be used to prioritize programmatic needs. All individuals in reentry and the alternative housing facilities will receive this assessment, and case planning will be developed to support the individual needs identified through this assessment.

Educational Services. In preparation for the upcoming primary election on April 23rd, the jail will begin distributing voter registration and absentee ballot forms in the beginning of March.

The jail has implemented a new software program that will allow us to more efficiently track books that are ordered and

received into the facility. Family members can submit book receipts electronically, which will allow us to process books that do not come with a packing list or receipt. Notes can be entered into the system when the individual's books are delivered. Family members receive an automated message at every step of the process, from when the jail receives the book to when it's delivered. If the book is denied for any reason, the denial notification is sent to the family, letting them know that the book was returned. This software also includes a process that allows for book appeals to be submitted and reviewed.

With the implementation of this new software, we are excited to announce that we have expanded book vendors. The jail is now accepting book vendors that ship through the United States Postal Service, UPS -- UPS and FedEx.

The Education Department has repurposed the classroom in the Education Center that is now being used as classroom space for juvenile females. Male and female students are now receiving instruction in separated classrooms. This is enabling female students to have access to a classroom setting.

The jail has welcomed a new therapy dog who began visiting with the juvenile students in the Educational Center today. Fergus is a 5-year-old black lab therapy dog who will join therapy groups conducted by the Academic Institute. Fergus will be onsite in the Educational Center every other Thursday. Both male and female juvenile students will have the option to interact with Fergus. The goal of the program is to decrease anxiety levels in students and oppositional behaviors that can interfere with academic growth.

That concludes this month's report for Programs. Karen Kollar will provide the healthcare services update.

DHSA KOLLAR: Thank you, Connie. Good evening, everyone.

I'll start with the January 2024

data for medical. The medical assistant

treatment for substance abuse disorder: 28

individuals prescribed oral Naltrexone; 1

individual receiving Vivitrol injection prior to

community release; 207 individuals treated with

Suboxone; 22 individuals treated with Sublocade;

and 22 individuals transitioned from Suboxone to

Sublocade; 49 individuals continued Methadone services.

Torrance State Hospital. Five patients transferred to Torrance; 5 patients committed to Torrance; 4 patients had a rescinded commitment due to clinical stabilization; 33 patients awaiting admissions with the longest wait since August 9, 2023.

Tier 4 and 5 Mental Health Tier

System. 36 individuals were identified for

Tier 4. Zero individuals were identified for

Tier 5.

Sick Call Request Data. 35 medical with the longest wait time of 2 days; 7 mental health with the longest wait time of 2 days; 281 psychiatric with the longest wait time of 28 days; 14 mental health specialists with the longest wait time of 10 days.

The Healthcare Updates.

Buprenorphine administration is completed during its own med pass because the medication is a sublingual formulation that requires approximately 10 minutes to dissolve. This provides nurses the opportunity to observe the patient and make sure all the medication is

absorbed, ultimately benefiting the patient and preventing diversion of the medication. process of this med pass has several components. Correctional staff members usually assist with the logistics of the med pass. The chairs in the housing unit are arranged in 3 rows, generally 9 to 15 total seats. The number of seats generally depends -- depending on how many patients prescribed this medication are on the housing unit and how safely, securely, and orderly the patients can be called out to a specific seat. The med pass nurse prepares the medication and administers the medication after proper patient identification. Consistent with most correctional agencies, administration of this MAT is conducted during a time in which the general population is not out for recreation, meals, programming, or any other type of activity. we seek to offer as much recreational time as possible, we have modified some operational procedures like this med pass to accommodate and observe these protocols. Doing this minimizes disruption to recreation time but also supports the goal of minimizing diversion.

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Operationally, once-a-day dosing

satisfies not only safety, security, and limited patient distractions while receiving this medication, the patient is daily dosed early from 12:00 to 4:00 a.m. to be ready for any necessary movement from the housing unit early in the morning for purposes like court. It is of note that throughout-the-day or multiple dosing is appropriate for outpatient setting because the patient is in charge of their own medication. Ιn the correctional environment, to comply with all expectations of safety, security, medication absorption, limited distractions, necessary patient movement to court, and like items, once daily dosing has proven to be effective. ensure the patients are dosed every 24 hours to assist in patient stability and structure while minimizing the chance for symptoms of withdrawal.

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Single-day dosing of MAT is FDA approved and ensures that the patient received their dose at a consistent time. The time also ensures there are no conflicts for individuals who have court appearances that day.

As SURN, substance use recovery nursing team, continues to progress through their hiring, training, orientation, and finally,

performance of their duties, this team has begun and will continue to relieve the current med pass nursing staff of this duty. Implementing a full functioning SURN team would allow for more complex continued process improvement items such as possibly moving this med pass to a different, consistent daily time while still complying with all expectations mentioned.

To share context to this process, there are currently 132 patients on this medication. These patients are housed in 11 different housing units throughout the facility. The structure of this type of med pass, along with the combination of the medical staff, the new SURN team, the correctional involvement, and the leadership guidance of the Director of Substance Use and the Deputy in Charge of this area, has achieved many expectations.

I'm sure that as this team, specifically the SURN team, develops and collaborates, the increasing patient volume on this medication will be an appropriate and positive experience for all involved in the effort. We will continue to assess our MAT process and make adjustments as the number of

individuals on MAT increases.

Also, to add in some information regarding induction, as this was mentioned during the last Jail Oversight Board Meeting, the addiction specialist provider sees patients in clinic to start induction based on MACRO, single dose induction protocol, which is done by detoxing the patient for at least 48 hours to avoid precipitated withdrawal. During these 48 hours, the patients are prescribed and administered the appropriate comfort medications. The context for this population is 89 patients have been inducted -- has induction completed since 12/10/2023.

Thank you.

JUDGE EVASHAVIK DILUCENTE:

17 Questions?

MR. O'CONNOR: I have some. So just a couple questions. I think this is more of a healthcare question, but I got a safety report that there were 2 nights each week where there was no -- in the last month, there was no mental health RN present in the whole building. And then I got another report that there were 22 nights in January where there was no mental

1 health staff in Intake. And I know in October, 2 we were doing a roving patrol in Intake. So is 3 this just a scheduling issue or staff shortage? 4 I mean, we know the staff is short. So let's 5 take that out, but is it we need to do a better 6 job of scheduling so that there is somebody 7 there? 8 DHSA KOLLAR: Right. There is a 9 mental health population, of staff in-house but 10 not always 24/7 around the clock. However, we do 11 have physical health nurses that perform those 12 duties when they aren't there. So it's not like 13 there's no one to take care of any mental health 14 15 MR. O'CONNOR: But specifically 16 mental health, no, it's -- so the physical --17 DHSA KOLLAR: Coverage --18 MR. O'CONNOR: -- coverage is going 19 over the mental health, so there's still the gap 20 in mental health? 21 DHSA KOLLAR: Yes. 22 MR. O'CONNOR: Okay. 23 DHSA KOLLAR: In physical medicine,

just so everybody is aware of the nursing staff,

whether it's RN, LPN, MA, CNAs, physical medicine

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covers for every specialty regardless of report off, scheduling, and they are very capable to do so.

MR. O'CONNOR: Okay. And then I know somebody mentioned the Incentive Program on hiring. I know it was changed. Are we just piggy-backing off the one that the County's had for the last few years, or are we changing that at all?

Incentive Program changed. It increased the amount of money that we're offering. We decreased the payments, so it was that three years. We decreased it to two years, and then we also reflected this based on the contract change of the probationary period as well.

We also added the additional positions of healthcare social worker and therapist to those eligible to receive the sign-on bonus.

MR. O'CONNOR: Okay. So these are different than the ones that we've had for the past few years. Okay.

All right. And then we, in our office, got a contract from I guess it's our

1 critical response team that we're doing training with the PA DOC. Is that coming up soon? 2 3 only question that I have from that is in the 4 contract, it said that there would be chemical 5 munitions used in the training, but based on the 6 referendum, you can't use that. So I just didn't 7 know if that part of the training, which it 8 shouldn't be, or if that's just general 9 terminology that's used when we work with the PA 10 DOC? And that can be an answer -- I want an 11 answer now, but I just didn't know if that's a 12 contract thing that you have to look back into. 13 CHIEF DEPUTY BEASOM: Yeah, so 14 the --15 MR. O'CONNOR: Is there separate 16 training just that's outside of the realm of 17 the --18 CHIEF DEPUTY BEASOM: Are you 19 referring to the Interagency Agreement that was 20 signed with the DOC? 21 MR. O'CONNOR: Yeah, and it had --22 as I said, it had chemical munitions in it, and 23 that sort of worried us because it shouldn't be 24 based on the referendum. 25 CHIEF DEPUTY BEASOM: Right. So

the PA Department of Corrections still utilizes chemical munitions. If they would come to the facility for training with us, we don't permit them inside the facility, okay?

MR. O'CONNOR: So -- but it's in the contract so should it be deleted, because that's the terminology that they use just -- it's just a broad terminology is what you're saying that they use.

CHIEF DEPUTY BEASOM: Sure.

MR. O'CONNOR: But when they come here, there's not going to touch it at all?

CHIEF DEPUTY BEASOM: Correct. If

our personnel would go to the DOC, one of the SCIs, then they may have the chemical agents there. But it will not be within our facility.

MR. O'CONNOR: Okay. And then two more questions. The Use of Force report I know there was a comment about an incident that happened. I think for us, it would be helpful -- I saw the report, or is it in my page -- oh, here it is. So we still are getting the 1 through 41 incidents right here. So can somebody tell me the incident that was mentioned in Public Comment which number that is? Because I -- I don't see

	94
1	enough detail in here. I think that's what a lot
2	of the Board has been discussing over the past
3	few months.
4	CHIEF DEPUTY BEASOM: Mr. O'Connor,
5	when I generate this report, it's a it's a
6	I take all the Use of Force packets from the
7	month, and I put those details on there. But
8	they're not in any particular order. So I would
9	have to go back
10	MR. O'CONNOR: Okay.
11	CHIEF DEPUTY BEASOM: and get
12	that particular incident packet to be able to
13	provide additional details to the Board, okay?
14	As we've said, we can't discuss specifics
15	MR. O'CONNOR: And that's why I'm
16	not using names or anything like that.
17	CHIEF DEPUTY BEASOM: Right. Yes.
18	MR. O'CONNOR: I'm just saying
19	like
20	CHIEF DEPUTY BEASOM: If anybody
21	would like to come to the jail
22	MR. O'CONNOR: You know we get
23	numbers. A little more detail yeah, would be
24	helpful.
25	And then lastly, is anyone at the

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1	jail involved in what's going on at Shuman
2	Center, giving some oversight? And at that
3	point, what's the capacity that the jail has at
4	that center?
5	DEPUTY WARDEN TOMA: The jail has
6	no capacity at Shuman. We have no
7	MR. O'CONNOR: So nobody from the
8	jail is doing anything at Shuman at this point?
9	DEPUTY WARDEN TOMA: I can say that
10	in my I can say that I have been at Shuman as
11	an extension of other roles that I facilitate in
12	the County, but not in my role
13	MR. O'CONNOR: Through a separate
14	role from the County, okay.
15	DEPUTY WARDEN TOMA: Yeah.
16	MR. O'CONNOR: So you're doing
17	double duty, sort of?
18	DEPUTY WARDEN TOMA: I have done
19	for most of my career. I have worked in other
20	departments
21	MR. O'CONNOR: Floated all over the
22	County, okay?
23	DEPUTY WARDEN TOMA: at their
24	request.
25	MR. O'CONNOR: Okay.

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1	DEPUTY WARDEN TOMA: Throughout.
2	MR. O'CONNOR: Of the Manager or
3	the County Executive or somebody like that?
4	DEPUTY WARDEN TOMA: To support the
5	County as a whole, I've been deployed to multiple
6	other departments, regardless of where my home
7	office was.
8	MR. O'CONNOR: Okay. Yeah, no. I
9	just I just wondered because different kinds
10	of facilities that we're talking about here, so I
11	didn't know what the involvement was between the
12	jail and Shuman Center, so.
13	Okay. Thank you.
14	JUDGE EVASHAVIK DILUCENTE: Ms.
15	Innamorato?
16	MS. INNAMORATO: Thank you, Judge.
17	First, I want to thank you all for framing your
18	reports and answering questions that were asked
19	last month. So I see that. I appreciate that.
20	I'm sure we'll hear from Councilperson Hallam of
21	whether all those questions were answered.
22	MS. HALLAM: Most.
23	MS. INNAMORATO: Most. Oh,
24	progress.
25	So just two quick questions. So

first, we kind of started to talk about Use of
Force. Do you have perspective on best practices
that exist elsewhere in the State on how Use of
Force is reviewed and how those reviews are made
public to the folks who are concerned about the
issues occurring in the facility?

INTERIM WARDEN DADY: Sure. I mean, I can speak to what we do with the State as far as the review process, and it does go through the administrative staff. We do not provide Use of Force reports to the public, so that's a little different.

But as far as looking at the process of Use of Force, we just have some different tools at the State that we, you know, as far as staffing, that's definitely an issue — that continues to be an issue at the jail. But using, you know, definitely mental health professionals prior to a Use of Force is something that — that is a best practice. So we don't have — the inmates that are trained at the State for certified peer support, we don't have the use of those at the county jail. There, we just don't have — the residents aren't there long enough to be trained and to do that.

know, layers of like prior to the physical force that needs -- may need to be used that are best practice that -- you know, definitely I want to see implemented at the county jail. So that's just something that is -- it's a work in progress. It is being looked at, and I don't -- you know, I don't condone anybody being abused no matter where it is, and we will definitely look into the Use of Force and investigate it thoroughly, so...

MS. INNAMORATO: Thank you. And you have commitment from our administration to help deploy those best practices.

The other one is just asking for an update on getting the Online Allegheny Survey available on the tablets that are available to residents.

INTERIM WARDEN DADY: I'd have to defer to Deputy Toma on that one.

DEPUTY WARDEN TOMA: Yeah, we're still working on it. The vendor ran into a character limit based on the survey, so we needed to reach back out to your office to see what we can do about how the questions are, and they

reached back out -- we went to a third party that submitted it and helps us manage the contract, they reached out to GTL to see if they could increase the character limit. So that's where we're kind of stuck in the middle. And the current link cannot be used because it's -- had security issues within our system.

MS. INNAMORATO: Okay. Thank you for that update.

JUDGE EVASHAVIK DILUCENTE: I have a question about this Use of Force. And what I'm hearing is that the last month when we were here, we requested -- or actually, it's not the Use of Force. The log -- that there were three categories, medical -- I can't find my note on this. But in any event, we said to you last month, okay, can't you -- instead of putting medical, can't you put broken leg -- or we gave a couple other examples. And now what I'm hearing today is that that would be a HIPAA violation because maybe only one person broke their leg, and then everybody would know who that was. Is that correct?

24 CHIEF DEPUTY BEASOM: (Nodding

25 | head.)

1 JUDGE EVASHAVIK DILUCENTE: Okay.

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And I'm also hearing that you have offered that the Oversight Board could come down to the jail and look at all of these reports, or you will bring these reports up here, and we can look at them together; is that correct?

CHIEF DEPUTY BEASOM: That is correct, Your Honor.

JUDGE EVASHAVIK DILUCENTE: Okay. So I'm thinking that maybe it would be -- I know that there are going to be Board members who object to not having one or two words on here, and I am hesitant to render an opinion on that without looking at your -- looking at what you would bring up here for us to review. going to suggest to the Board that you bring these documents, the Use of Force and the Segregation documents, I don't know, to the County Council Conference Room. Is that -- and let us look at them. And then -- and then maybe we'll argue with you, or then maybe we'll say, okay, we agree. But I feel like we need to look at them to render an opinion on whether you can add these two words after each incident. What does -- what's everybody's pleasure on that?

1 MS. HALLAM: I just -- something
2 that -- you know, there is no personally
3 identifiable information, so it is not a HIPAA
4 violation. So the fact that that keeps being

5 used as an excuse over and over and over again is

6 absolute nonsense.

Also, I think it's evidenced by the reports that we are sent by the liaison when she conducts her investigations that she's sending us a heck of a lot more information than they're giving us in these meetings, so why is she allowed to give that information and send it to us via e-mail but we can't cut out the middleman and have them just send it to us?

Like, the fact that we actually have to schedule, which we have all seen how hard it is in our schedules to schedule a time that we can all get together, we can all be in the same place, we can all review the same documents; it is an unnecessary burden when they could simply give us the information we're asking for. They keep saying like these are not for public consumption. We're not asking for the public to have them. I wouldn't have to ask for it over and over again in the meetings if you would

1 simply send it to us as Board members. And I 2 think that's all we're asking for. I think it's 3 a very simple agreement this will not be 4 disseminated to the public, but we, as Board 5 members, should be able to receive them. 6 JUDGE EVASHAVIK DILUCENTE: 7 How would you respond to that? 8 JUDGE BIGLEY: Can I make a 9 comment? 10 JUDGE EVASHAVIK DILUCENTE: 11 JUDGE BIGLEY: I'm no rocket scientist, but I 12 don't think that necessarily --a violation of 13 HIPAA isn't necessarily that we're disseminating 14 it to the public. It's them disseminating it to 15 anybody. So do you see what I'm saying? 16 17 MS. HALLAM: Yeah, but there's 18 no --19 JUDGE BIGLEY: So it's 20 disseminating it outside of the patient's rights. 21 So it's not necessarily us telling everybody in 22 the audience. It's the jail telling anyone 23 outside of the -- you know, the resident or the 24 patient. So I don't -- I was frankly concerned 25 sometimes with information we're even getting

1 from our liaison, to be quite honest with you 2 because sometimes when I'm reading it, I'm 3 thinking we're getting information that sometimes 4 is in violation of HIPAA, and I'm wondering how 5 she's getting it to be honest with you. So, you 6 know, again, I would caution that it's -- you 7 know, and I agree that sometimes people scream 8 HIPAA when it's not HIPAA. But it's not an issue 9 of us disseminating it publicly. It's any time a 10 provider, or in this case, the jail who provided 11 medical or something is disseminating it beyond 12 to anyone. 13 So, I don't know -- I. 14 JUDGE EVASHAVIK DILUCENTE: I don't 15 know. 16 MS. HALLAM: So I do understand 17 that. 18 JUDGE BIGLEY: Ask the County 19 Solicitor. 20 MS. HALLAM: He is -- will tell you 21 that he is not our solicitor and will not tell us 22 anything, but we'll have our own soon.

point could say on behalf of the jail he could

JUDGE BIGLEY: Well, he -- at this

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tell us.

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1	MS. HALLAM: Sure. Please tell us
2	on behalf of the jail.
3	JUDGE EVASHAVIK DILUCENTE: Mr.
4	Bacharach, we're inviting you up.
5	MR. BACHARACH: And I understand
6	that.
7	JUDGE BIGLEY: No, would you agree
8	that HIPAA would apply when the jail tells
9	anyone?
10	MS. HALLAM: He's not going to
11	answer you.
12	MR. BACHARACH: No, I wouldn't want
13	to answer on a specific point because that would
14	be it's very complicated.
15	JUDGE EVASHAVIK DILUCENTE: But as
16	a general premise
17	MR. BACHARACH: As a general
18	premise, the jail doesn't give individually
19	identifiable information about an inmate's
20	medical condition to anyone outside of the jail
21	medical staff. That's the general rule.
22	And it's not that I'm not saying
23	there aren't exceptions, but I would be very
24	careful about that.
25	JUDGE BIGLEY: So I guess you're

saying -- is there any way you could tie it back by giving it saying this particular Use of Force -- why don't I get -- why don't -- I agree. Why don't we do this. Have them bring the stuff, and then we'll decide whether or not it's --

MS. HALLAM: Right. And we could even look at the stuff and say, hey, give us this report and redact this personally identifiable information. Again, that is the key to HIPAA is that you can personally identify the person. We are not asking for you to tell us like John Smith, this happened to him on this date. We want to know this happened to a person on this date. That is not a violation of HIPAA.

Second of all, there are exceptions to HIPAA for oversight and investigatory bodies.

Third of all, you're already giving the information to the liaison. You're -- if it's HIPAA, you're already violating it by giving it to the liaison. So I would like to actually hear an answer to what do you see as the difference between providing that information to the liaison and providing it directly to us? That is what I would specifically like an answer to.

1 MR. BACHARACH: I don't know what 2 information is given to the liaison. So I can't 3 answer --4 MS. HALLAM: Very detailed medical 5 information with personally identifiable 6 information that I believe is our right to have. 7 But we are being denied it as Board members, but 8 it is being freely given to someone who is coming 9 to the jail on our behalf and then regurgitating 10 the information to us? 11 MR. BACHARACH: You're asking a 12 specific opinion if you can be given -- I can't 13 give an answer to these generalizations. 14 JUDGE EVASHAVIK DILUCENTE: 15 Well how about the Use of Force report, because 16 that doesn't contain HIPAA information. 17 couldn't -- why couldn't we get details on the 18 Use of Force? 19 MR. BACHARACH: I don't know. 20 There could be safety and security issues with 21 that. I mean, there is some medical in there --22 there can be, and there usually is -- in fact, 23 there always is when there's a Use of Force 24 medical information in these reports.

But again, I don't know --

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1 JUDGE EVASHAVIK DILUCENTE: Well, 2 okay. The circumstances leading up to the Use of 3 Force. 4 MR. BACHARACH: The reason why the 5 force was used? 6 JUDGE EVASHAVIK DILUCENTE: 7 MS. HALLAM: Uh-huh. 8 MR. BACHARACH: I don't know that 9 there's a specific reason that that would be a 10 problem unless there's some specific safety and 11 security detail that might be -- as a general 12 rule, I don't think there is. 13 JUDGE EVASHAVIK DILUCENTE: Okay. 14 Could I hear from someone on the -- from the jail 15 on that issue? 16 CHIEF DEPUTY BEASOM: Sure, 17 Your Honor. So I think there's a 18 miscommunication as to what's being asked here. 19 The jail administration, we're not denying this 20 information to the Board, okay? We've offered 21 multiple times, multiple different months for the 22 Board to come to the jail. We'll show you 23 whatever you want to see. We'll bring that 24 information to you. But at the end of the day,

after the review is over, we have to bring that

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1 material back to the facility to maintain the 2 integrity of those processes, okay? 3 MS. HALLAM: Again, we are getting 4 reports e-mailed to us that include all of the 5 information that we are asking for you right now 6 from our liaison. What we're saying is, why do 7 we have to send her there to do an investigation 8 when you could just send the exact same 9 information to us? 10 CHIEF DEPUTY BEASOM: I'm not going 11 to send any of it over e-mail. 12 MS. HALLAM: But it's already being 13 sent over e-mail. 14 CHIEF DEPUTY BEASOM: Ms. Hallam, 15 I'm -- I can't comment on that. 16 JUDGE EVASHAVIK DILUCENTE: 17 can't answer that probably. 18 MS. HALLAM: Right. I understand 19 that. 20 JUDGE BIGLEY: Is all of the 21 information that we get on this summary of Use of 22 Force contained in one document? 23 CHIEF DEPUTY BEASOM: It's not a 24 single sheet of paper. It's an entire incident 25 packet. So --

1	JUDGE BIGLEY: So then let me ask
2	you this. Every month can our liaison get the
3	entire packet?
4	CHIEF DEPUTY BEASOM: The liaison
5	has access to the packets the same as the
6	Oversight Board does.
7	JUDGE BIGLEY: So then we can just
8	
	send the liaison down every month, and she can
9	get all of the packets and give it to us.
10	CHIEF DEPUTY BEASOM: She can have
11	access to the information. We will not hand over
12	the entire packet.
13	JUDGE EVASHAVIK DILUCENTE: In
14	other words, but she could sit down with a
15	notebook and take notes on these 41 Use of Force
16	incidents and report back to us?
17	CHIEF DEPUTY BEASOM: Yes.
18	JUDGE EVASHAVIK DILUCENTE: She
19	just couldn't take the packet out of the jail?
20	CHIEF DEPUTY BEASOM: Correct.
21	JUDGE BIGLEY: But it's in one
22	packet?
23	CHIEF DEPUTY BEASOM: Yes,
24	Your Honor.
25	JUDGE BIGLEY: Okay.

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1	CHIEF DEPUTY BEASOM: Not all of
2	the just the just to be clear, a single
3	incident, a Use of Force incident is its own
4	packet. You're not saying the entire month is in
5	a packet?
6	JUDGE BIGLEY: But it would be
7	something that would she would be able to get
8	it from one place?
9	CHIEF DEPUTY BEASOM: Correct.
10	Yes.
11	JUDGE BIGLEY: Okay.
12	She wouldn't have to comb through
13	the
14	CHIEF DEPUTY BEASOM: Nope. I have
15	the I have them all.
16	JUDGE BIGLEY: Okay. There we go.
17	We'll do that. Thank you.
18	MS. HALLAM: Great idea. Thank
19	you.
20	Are you ready for me?
21	JUDGE EVASHAVIK DILUCENTE: Go
22	ahead.
23	MS. HALLAM: Okay. I have a few
24	questions as well.
25	So bear with me. I'm just trying

to organize myself. So first of all, I'm going to ask the question that made me the most angry, so luckily, we had some time to kind of calm down since it was said. So you were speaking about what I brought up last month about folks being given, first of all, their entire dose of Suboxone all at once and in the middle of the night. And so you said that the FDA has approved both of those things, but the reality is the FDA has only approved both with individualized determinations, which would mean that the medical professional would have to say for each patient receiving the MOUD that yes, it is in their best interest to receive it in the middle of the night and be woken up to get it, and yes, it is in their best interest for medical reasons to receive that medication all at once.

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Do you agree?

DHSA KOLLAR: (Nodding head.)

MS. HALLAM: So you're telling me

that for every single individual that is receiving those medications, that an individualized determination was made that it is in their best medical interest to receive that

medication all at once and to be woken up in the

1 middle of the night to get it? 2 DHSA KOLLAR: Yes. And how I can 3 answer it is there is a prescription order from a 4 provider who reviews not only the script and the 5 dose but does see the patients in-clinic as 6 needed. So reviews all of them, 132 of them. 7 MS. HALLAM: Right. 8 DHSA KOLLAR: Currently. 9 MS. HALLAM: And so what you're 10 saying is if that person was not in the jail and 11 subject to the restrictions that are placed on 12 the folks in the jail receiving these 13 medications, that that provider would still 14 prescribe that person their entire dose, daily 15 dose at once? 16 DHSA KOLLAR: No, I'm not saying 17 that. 18 MS. HALLAM: And would still 19 require them to be woken up. 20 DHSA KOLLAR: I'm not saying that. 21 MS. HALLAM: So you are 22 admitting --23 DHSA KOLLAR: I'm saying that 24 inside a correctional environment like ours, with 25 the constraints that we have, the provider is

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1	giving the appropriate medication to the patient.
2	Dose and the time is that it's administered,
3	is based on 24 hours.
4	MS. HALLAM: Then those are not
5	individualized.
6	DHSA KOLLAR: That's not
7	necessarily what 24 hours, but as long as they're
8	dosed within the 24 hours or at the 24-hour
9	period.
10	MS. HALLAM: Then those are not
11	individualized determinations. That's a group
12	determination for the entire group within the
13	jail.
14	DHSA KOLLAR: The time is a group
15	determination.
16	MS. HALLAM: But it is not allowed
17	to be as per the FDA regulations. They say that
18	that is for individualized determination. It's
19	to be made on an individual basis.
20	DHSA KOLLAR: For the prescription
21	dose and that 24 hours, not necessarily the exact
22	time.
23	MS. HALLAM: Okay. So you're
24	telling us that there is no less restrictive way
25	that we could be giving them this medication? It

couldn't happen -- because you mentioned specifically that we don't want to interfere with people going to court. You know, if you gave it to them after dinner, is anybody going to court at 6:00 at night, 7:00 at night?

DHSA KOLLAR: So when the SURN team comes, and there's more staff available, and there's more coordination so that all those items can be assessed and all those expectations can happen, then that group can probably determine if the -- the time, the 24-hour daily dose can change.

MS. HALLAM: So then the only reason that that dosage is happening in the way it is right now is because of lack of staffing?

DHSA KOLLAR: No. It's happening because of recreation, time for movement, absorption.

If you have this medication delivered at any time, it is -- you have to come out. You have to wait the 10 minutes after, so no one else can be out as you have this group out taking this medication.

MS. HALLAM: So a lot of them are on a pod by them -- like they're the only folks

1 on the pod. There's no one not receiving that 2 medication on the pod, so the excuse that was 3 given about the diversion of medication --4 DHSA KOLLAR: No, there are 11 5 different pods. 6 MS. HALLAM: But there are pods 7 where everybody on the pod is receiving Suboxone. 8 I was on the pod myself. 9 DHSA KOLLAR: Uh-huh. 10 MS. HALLAM: So on that pod, why 11 are they still being woken up in the middle of 12 the night? Why are they still receiving their dose all at once? It's because the jail has made 13 14 a group determination for all of the folks 15 receiving the medication to do it this way. 16 DHSA KOLLAR: So you're telling me 17 that --18 JUDGE EVASHAVIK DILUCENTE: The 19 question is, if there a whole pod that is getting 20 this medication, why can't that pod get it at --21 during business hours? 22 DHSA KOLLAR: Yeah. And I would 23 say to that, once the SURN team can really get 24 into what are the situations, what does that pod

do? What does everybody else need to do to make

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that happen? I think that could be a determination.

MS. HALLAM: So it is because there has not been staff members for that team hired yet?

DHSA KOLLAR: Well, they're going through the process. We just had 3 hired in the last two weeks. Yay. And we have to remember, we have, right now, not all SURN delivering the MOUD or the Suboxone tabs. We have physical health doing it too and they have many other med passes to do too. So we're coordinating that.

So SURN is doing some while medical is doing the other.

MS. HALLAM: So are there other medications in the jail that there is concern about diversion of medications? Are there other medications given out other than MOUD?

DHSA KOLLAR: Well, let's say there's no other medication given out this way.

MS. HALLAM: Right. That was what I was getting to. So thank you for jumping to that for me. There is no other medications that are given out to people in the jail in the method that way that we're giving out MOUD?

DHSA KOLLAR: Uh-huh.

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MS. HALLAM: So we are specifically treating folks who receive MOUD in a way that's different than folks who are receiving any other type of medication?

DHSA KOLLAR: Well, this -- I quess I'm not clear on your question. Maybe my answer is that when we do this particular Suboxone pass, this particular medication needs this attention and this delivery mechanism, if you will, this type of administration.

MS. HALLAM: But I thought that what you just said was that it doesn't and that once this team is implemented, it will have a different delivery method and mechanism and time schedule?

DHSA KOLLAR: No, it will always be that they have to come out. They have to wait the 10 minutes after administration. It will always have to be administered that way.

JUDGE BIGLEY: Are you talking about because of how long you have to watch them because the concern is that they can pass it?

DHSA KOLLAR: Uh-huh.

JUDGE BIGLEY: Unlike all other

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1	medications that you're delivering?	
2	DHSA KOLLAR: Yes.	
3	JUDGE BIGLEY: Is that what we're	
4	talking about?	
5	DHSA KOLLAR: Yes. And no other	
6	distractions	
7	JUDGE BIGLEY: So you're talking	
8	about other medications they give, they don't	
9	have to watch them as long? Is that what we	
10	mean?	
11	MS. HALLAM: Right. That's what	
12	I'm saying is if the concern is diversion, what	
13	is the difference between diverting Suboxone and	
14	diverting a different type of medication?	
15	JUDGE BIGLEY: I don't think they	
16	watch them as long, do they?	
17	DHSA KOLLAR: No.	
18	MS. HALLAM: No, that's what I'm	
19	trying to understand is why?	
20	JUDGE EVASHAVIK DILUCENTE: Okay.	
21	Why	
22	JUDGE BIGLEY: Is it because they	
23	can it's the time is way longer for	
24	Suboxone, isn't it?	
25	DHSA KOLLAR: Right. Yeah. You	

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1	have to see that it's been absorbed
2	MS. HALLAM: Dissolved.
3	DHSA KOLLAR: versus the pills
4	that they're having for whatever other reason.
5	There's not diversion issues, that the patient
6	can take the pills right in front of you, swallow
7	them and move on. There's no absorption.
8	There's no look to see if it's still in your
9	mouth. It's an instant kind of thing.
10	MS. HALLAM: Right. But then on
11	the pod where everyone is prescribed that
12	medication, why are they we still following
13	the same process as you are on other pods where
14	diversion is a concern?
15	DHSA KOLLAR: The activities that
16	are happening at that time during the day,
17	whether there's dinner, whether there's other
18	activities throughout
19	MS. HALLAM: I'm going to move on,
20	and we'll talk about this later.
21	DHSA KOLLAR: Okay. Thank you.
22	MS. HALLAM: Because I have other
23	questions I need to ask.
24	DHSA KOLLAR: Okay.
25	MS. HALLAM: So the next question I

1 have is Lu was asking specifically about 2 screening for folks with autism as they come in 3 the jail, which I think is a fantastic idea. 4 know we had talked about that in the past. I 5 really hope that yinz work with her to do that. 6 She is a leading expert in this field, and I 7 think that you should really utilize her 8 expertise on this. But I couldn't help but 9 remembering, and I was actually looking through 10 my phone to find it as we were sitting up here, 11 that the NCCHC, one of the deficiencies when they 12 did our yearly inspection, found that we didn't 13 do enough training to help folks with autism and 14 to teach the staff at the jail specifically how 15 to deal with folks with autism. So I want to 16 know if you can give me any update on plans for 17 screening or plans to do additional training to 18 try to comply with the NCCHC standards? 19 DHSA KOLLAR: I do know that 20 there's tools created, and we've implemented 21 them -- whether it's this tool, I don't know. Ιt 22 would be nice to compare what we have to what 23 this woman has available. 24 MS. HALLAM: What's the word you 25 said, "tool"?

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1	DHSA KOLLAR: Tool, T-O-O-L.
2	MS. HALLAM: Oh, tool. I'm so
3	sorry. I was like thinking something else.
4	DHSA KOLLAR: Like a screening.
5	MS. HALLAM: Like a screening.
6	Okay. So you have a screening?
7	DHSA KOLLAR: Uh-huh.
8	MS. HALLAM: Okay. I have never
9	heard of that before, and I know it has been
10	broughten up brought up in the past. Can you
11	give us a little information on what that
12	screening looks like? It is a form that's filled
13	out? Who conducts it?
14	DHSA KOLLAR: It's a questionnaire.
15	So I think that a self-questionnaire, so I
16	think that could be presented.
17	MS. HALLAM: It's a
18	self-questionnaire, as in they fill it out
19	themselves, or they're asked the questions, and
20	they answer themselves?
21	DHSA KOLLAR: It's interactive, but
22	yes.
23	MS. HALLAM: Okay.
24	DHSA KOLLAR: But yes, they
25	self-report.

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1	MS. HALLAM: Yeah. Can you please
2	send that to us? I'd really like to see that.
3	And then what about specifically
4	the trainings?
5	DHSA KOLLAR: That I don't have any
6	information of what we did or what we plan to do.
7	MS. HALLAM: Does anybody?
8	JUDGE EVASHAVIK DILUCENTE: Do you
9	have any special accommodations for people who
10	are diagnosed as autistic?
11	DHSA KOLLAR: I know that we've
12	been taking people that I guess I don't want
13	to speak out of turn, so I would have to look
14	into what we do because I know we do have have
15	had that opportunity to work with autistic
16	patients.
17	MS. HALLAM: Okay. Next
18	JUDGE EVASHAVIK DILUCENTE: Could
19	you give us an update on that? I'm sorry.
20	MS. HALLAM: No, don't apologize.
21	JUDGE EVASHAVIK DILUCENTE: Next
22	month?
23	DHSA KOLLAR: Uh-huh.
24	JUDGE EVASHAVIK DILUCENTE: Okay.
25	Thank you for that.

1 MS. HALLAM: Thank you. Okay. My next question since we heard again, which I think 2 3 we've heard a lot lately, about dietary 4 restrictions, I had a couple questions 5 specifically about that. 6 So who in the kitchen is 7 responsible for making sure the food being served 8 complies with specialty diets? 9 DEPUTY WARDEN TOMA: So that would 10 be vendor. They receive every day the specialty 11 diet menus, whether it would be medical, 12 religious, and then they are the ones who ensure 13 that those are prepared and then delivered to 14 those housing units. 15 MS. HALLAM: And is that something 16 that's required as per our contract with the 17 vendor? 18 DEPUTY WARDEN TOMA: Yes. 19 MS. HALLAM: Who ensures 20 compliance? 21 DEPUTY WARDEN TOMA: We have hired 22 an individual who oversees that. We also have a 23 sergeant assigned down there, that those -- that 24 we are receiving those, and they are getting 25 those meals.

1 MS. HALLAM: Okay. And I remember 2 previously, we were told that there was a 3 dietician specifically in the jail. Is that 4 through the vendor, or is that a county employee? 5 DEPUTY WARDEN TOMA: Correct. 6 contract provides that they have to provide a 7 dietician. 8 MS. HALLAM: Okay. Okay. Can we 9 speak to that person? 10 DEPUTY WARDEN TOMA: We can reach 11 out to the vendor and make that request. 12 MS. HALLAM: Okay. I know that has 13 happened before, so maybe when you reach out, can 14 you like cc us on it, because we've asked this, I 15 mean, going back at least a year or so. 16 DEPUTY WARDEN TOMA: With the 17 previous vendor, they asked that the questions be 18 given to them in advance so they could come 19 prepared. I'm sure this vendor may make the same 20 request, but I will cc the Board when I submit it 21 to Trinity Foods for the request. 22 MS. HALLAM: Thank you very much. 23 The next thing is that somebody 24 brought up a really good point about hunger 25 strikes in general. And does the jail keep track

125 1 of how many folks in the jail are currently on an 2 active hunger strike? 3 CHIEF DEPUTY BEASOM: Yes. 4 MS. HALLAM: Can you give me that 5 number? 6 CHIEF DEPUTY BEASOM: One. 7 MS. HALLAM: Just one. Okay. Can 8 you give us that number every month going 9 forward, please, in your report? 10 CHIEF DEPUTY BEASOM: Sure. 11 MS. HALLAM: Thank you. 12 Next, about a librarian. I know 13 that's something that was talked about in the 14 past. I had gotten a report that the library 15 was -- I don't want to call it on hold or pause 16 or at least maybe not functioning to its full 17 efficiency because of a lack of support for the 18 library. Can someone speak to the status of 19 that? 20 DEPUTY WARDEN CLARK: Yes. So 21 we're currently working with the Department of 22 Human Services to finalize an RFP. It's going to 23 go out for Reentry Services, and in that RFP, we 24 are looking for an individual who can help us

with the library organizing in and ensuring that

25

individuals can request specific books and those get distributed to them.

MS. HALLAM: And what's the timeline on that RFP?

DEPUTY WARDEN CLARK: It's in the final editing to go out, so it should be soon.

It's been -- it's already been drafted. It's just waiting for final edits.

MS. HALLAM: Okay. Is there anything we can do to support in the meantime?

Because I know we've just been waiting a long time on this library to be fully up and running.

DEPUTY WARDEN CLARK: It's a pretty big undertaking just -- I mean, we have the books. They're on shelves. We want to get a better organization system for it so that we can track them a little better, and that's what we're going to do with this Resource Coordinator position that we're looking to RFP for.

MS. HALLAM: Okay. Thank you very much. And then kind of along those lines too, you talked about the new -- the new ability for vendors who are sending books into the jail, but you really just talked about the shipping mechanisms and not really which vendors. So does

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1	that mean that any vendor that ships through,
2	what was it, USPS, UPS and what was the third?
3	DEPUTY WARDEN CLARK: FedEx.
4	MS. HALLAM: And FedEx. So
5	basically, any major shipping?
6	DEPUTY WARDEN CLARK: Correct.
7	MS. HALLAM: So pretty much you can
8	get a book sent in from anywhere?
9	DEPUTY WARDEN CLARK: Well, yes.
10	But Amazon can be a problem because they ship
11	their own, you know packages.
12	MS. HALLAM: So no Amazon?
13	DEPUTY WARDEN CLARK: But and
14	sometimes Amazon will ship via one of those
15	means.
16	MS. HALLAM: But you don't know.
17	DEPUTY WARDEN CLARK: But if they
18	don't, we wouldn't accept it. But anyone that
19	ships through those means, those will be accepted
20	by the jail.
21	MS. HALLAM: No more like have to
22	have a paper receipt in the box, nothing like
23	that?
24	DEPUTY WARDEN CLARK: You still
25	have to have the receipt, but we've created the

software that allows individuals to go on our website and upload their receipts. Those come directly to us, and then we match that with the books when they're delivered.

MS. HALLAM: Awesome. I am so glad that that is happening. So thank you very much for that.

My next question, oh, is kind of like random, but I might as well check it off so I can move on to the next page. Deputy Warden Toma, where is your office? You talked a lot about how you do like different roles and have different like home offices. Where are you based out of, your job? Physically, where do you go every day?

DEPUTY WARDEN TOMA: It all depends on where my assignment is for that day.

Tomorrow, I'll be reporting to the Law Offices because that's where I'm needed. So it's wherever I'm going. So I have arbitration tomorrow. I'll be there.

MS. HALLAM: Is that like jail-related arbitration?

DEPUTY WARDEN TOMA: Yes.

MS. HALLAM: Okay. So what -- what

1 department is your position under like in the 2 accounting of the jail -- the counting of the 3 county? Are you a jail employee? 4 DEPUTY WARDEN TOMA: I quess I'm 5 going to ask you to be more specific as far as am 6 I employed by the -- I'm employed by Allegheny 7 County. 8 MS. HALLAM: Right. But is your 9 position housed under the jail? 10 DEPUTY WARDEN TOMA: The jail 11 budget, yes. 12 MS. HALLAM: The jail budget. 13 Organizationally, where is your position out of? 14 DEPUTY WARDEN TOMA: In my capacity 15 as Deputy Warden, it's housed under the jail. 16 MS. HALLAM: So do you have 17 multiple separate positions? 18 DEPUTY WARDEN TOMA: In my -- I --19 MS. HALLAM: No, just in general, 20 because you seem to be very intentional about 21 saying in my capacity as Deputy Warden. So I'm 22 wondering if you have more than one position 23 within the county. 24 DEPUTY WARDEN TOMA: No, I'm Deputy 25 Warden at the Allegheny County Jail.

1 MS. HALLAM: Okay. But yet you 2 said you have been kind of like subcontracted out 3 to other departments that are not the jail, so 4 I'm just a little confused about that. 5 DEPUTY WARDEN TOMA: Ever since I 6 started my employment with the Allegheny County 7 Medical Examiner's Office, if I have been asked 8 to use my resources to support the County in any 9 way, I support the County in any way that I can. 10 MS. HALLAM: And so how much time 11 would you say you spend on jail-related work? 12 DEPUTY WARDEN TOMA: 40 hours a 13 week. 14 MS. HALLAM: So your entire work is 15 with the jail? 16 DEPUTY WARDEN TOMA: No, I'm 17 saying -- you asked me how many hours a week that 18 I dedicate to the jail. 19 MS. HALLAM: Uh-huh. 20 DEPUTY WARDEN TOMA: I dedicate 40 21 hours a week minimum to the jail. 22 MS. HALLAM: And how many hours do 23 you dedicate to work outside of the jail? 24 DEPUTY WARDEN TOMA: It all depends 25 on what is needed of my time.

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1	MS. HALLAM: Cool. Thanks. But do
2	you have do you have an office?
3	DEPUTY WARDEN TOMA: Do I have an
4	office in the jail?
5	MS. HALLAM: Yeah.
6	DEPUTY WARDEN TOMA: I do.
7	MS. HALLAM: Do you have an office
8	anywhere else in the County?
9	DEPUTY WARDEN TOMA: Nope. I have
10	an office at the jail.
11	MS. HALLAM: Gotcha. And would you
12	say you spend the majority of your time in that
13	office?
14	DEPUTY WARDEN TOMA: I currently
15	spend the majority of my time in that office.
16	MS. HALLAM: Gotcha. Thank you
17	very much.
18	The next question I have oh,
19	it's actually online public comments. Did we get
20	any? Somebody told me earlier today they
21	submitted one.
22	JUDGE EVASHAVIK DILUCENTE: Yes.
23	They're attached.
24	MS. HALLAM: Yeah, so usually we
25	read them. I didn't even look at them in this

material. Are they all these e-mails?

JUDGE EVASHAVIK DILUCENTE: Yes. I

3 thought you didn't read them.

MS. HALLAM: No, we usually do, but I mean, I'm not going to like stop everything to get to it. If just going forward, we could read them because I had some folks reach out specifically, like looking forward to hearing their comment read.

Maybe we can talk about it in our bylaws conversation.

JUDGE EVASHAVIK DILUCENTE: Let's
talk about it. Okay.

MS. HALLAM: We can talk about it more. Okay.

Next thing is -- oh, yeah. So yinz seem to read like very prepared notes whenever you're all giving your reports leading up to our questions. Can we get those notes ahead of time so that maybe we can prepare more for what you're going to tell us here? It seems that they are typed up. They are planned -- and I think it would be really helpful to us as Board members to be able to prepare our questions and direct our questions if we know what you're going to say.

1 Would that be a problem with any of 2 you, you know, the sheet that you have in front 3 of you where you're reading your statements for 4 each of the Deputy Warden reports and the Warden 5 reports? Could you send those to us prior to the 6 meeting, please? 7 DEPUTY WARDEN TOMA: We are working 8 on those up until the point we show up. So no, 9 we can't send them in advance. 10 MS. HALLAM: Oh, sure. Even before 11 the meeting. 12 DEPUTY WARDEN TOMA: We are 13 literally --14 I mean, you walk over MS. HALLAM: 15 probably what, like 15, 20 minutes before the 16 meeting. Even if you could send them sometime 17 before 4:00 would be great. 18 DEPUTY WARDEN TOMA: We can look 19 into it, Ms. Hallam. 20 MS. HALLAM: No, can you please do 21 that? I see that they are typed up, prepared 22 every single meeting. I would like them to be 23 shared with us so that we can more adequately 24 prepare for our jobs. 25 Does anyone have any objections to

that?

MS. HALLAM: No? Okay. I will really look forward to getting those for the next meeting then.

Also, I think it would really help our reporter, the person who does our meeting minutes, if we could have that all in writing as opposed to her having to verbalize it. So thank you very much for that.

Next, specifically, I know

Controller O'Connor brought this up, and I was so glad because I also have this sheet that's literally just like scrolling, scrolling, scrolling, scrolling, scrolling, scrolling, scrolling, just -- oh, there's more, scrolling, scrolling, scrolling of just like all these -- all these shifts that had no mental health RN in the building, no provider, PAs, doctors, or nurse practitioners in the building, no LPN in the building. I mean, every single day, multiple shifts throughout the day, there is no something for many, many, many of those shifts. And you had talked about how there are still other medical professionals. I don't know who said that. Maybe you said that somebody

was -- oh, maybe you said that, about how, oh, there might not be a mental health nurse, but there is an RN and that they can handle all that stuff. So I was just wondering, you know, with regards to an RN who is not a mental health professional taking on mental health responsibilities, are they then compensated for those additional responsibilities, or is there some kind of compensation package for people who are doing two jobs because of the short staffing crisis?

DHSA KOLLAR: Well, I don't know that they're doing two jobs because they're doing one assignment, and the assignment would be for the physical health -- in this case, covering the mental health unit. I understand that physical health will have the same expectations for emergency, med pass, taking care of the patient, wound care, and the needs that they need done.

MS. HALLAM: Okay. But if there's supposed to be two people -- like if that's like what is standard practice, let's just say -- that the jail would like to have two people doing this job, and then instead, one person still has to do all the job, wouldn't that be them doing the job

of two people?

DHSA KOLLAR: Well, in maybe a case like there's a report-off and then the Assistant Director of Nursing would cover that shift, yes, they would still have to be an Assistant Director of Nursing and ask any -- answer any questions with anyone else, but they would take an assignment for that day.

MS. HALLAM: So then it is safe to say that often one employee is doing the job and the work of two employees?

DHSA KOLLAR: I'd say -- how I would think of that is as we build our staff, we are doing sort of more work instead of triaging the work we did maybe a year or two ago because we now have two staff members. For instance, you have an Assistant Director of Nursing group that has zones. If they can't attend to their zone and do the tracking and trending, or doing the advancement in that area, they would do the med pass for the nurse that -- or the open shift, or the med pass nurse that reported off.

MS. HALLAM: Okay. And is there any additional compensation for doing those additional responsibilities?

DHSA KOLLAR: No, they would just
substitute doing those duties.

MS. HALLAM: Okay. Thank you very

4 much.

My next question is about -- I know we had talked in the past about notifying -- whenever someone is released from the jail because they go to the hospital, we don't always get those reported to us, like what happens next. We all -- often have to go through ulterior means to figure out, like, did that person pass away? Are they alive? Were they released back in the community?

And so I was wondering what kind of updates is the jail given after an incarcerated individual is sent to the hospital if they are released from custody?

DHSA KOLLAR: If they're released from custody, we do not get any updates.

MS. HALLAM: Okay. So now I'm going to read an excerpt from the DOJ -- an excerpt from the DOJ website specifically about incarcerated individuals who die in the hospital. It says, "If an incarcerated individual is transferred to a medical facility and dies there,

not in a correctional facility, is that reportable under the Federal Deaths in Custody Reporting Act?

"Yes. If the incarcerated person absent the medical condition would have been in prison at the time of the death, it counts as a reportable death. Although the person was not physically in the correctional facility at the time of the death, the death is still one of an incarcerated individual."

Are you familiar with the Deaths in Custody Reporting Act? It's the federal law that requires the jail to report deaths in custody.

 $$\operatorname{\textsc{DHSA}}$$ KOLLAR: When there are deaths in custody, yes.

MS. HALLAM: Right. But do you see that if -- but for the medical condition they would have been in jail, which would be the instance where someone is released because of their medical condition, it is counted as a reportable death?

JUDGE EVASHAVIK DILUCENTE: I think what's she's saying is that when the person went to the jail, the Judge lifted their detainer --

MS. HALLAM: Uh-huh.

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1	JUDGE EVASHAVIK DILUCENTE: Or	.00
2	released them; is that correct?	
3	DHSA KOLLAR: Exactly.	
4	JUDGE EVASHAVIK DILUCENTE: Okay.	
5	Not	
6	DHSA KOLLAR: Or that could happen,	
7	yes.	
8	JUDGE EVASHAVIK DILUCENTE: Okay.	
9	MS. HALLAM: Right. You're right.	
10	They call it like a 6-A or something, and they	
11	release them.	
12	JUDGE EVASHAVIK DILUCENTE: Okay.	
13	Yes.	
14	But I think they're saying that in	
15	that instance, they've been released from the	
16	jail. They're no longer under the jail's care,	
17	and therefore, the jail would not report that	
18	death if it happened after they were released.	
19	MS. HALLAM: That is what she's	
20	saying.	
21	DHSA KOLLAR: You're right.	
22	MS. HALLAM: But that's illegal.	
23	DHSA KOLLAR: We could investigate	
24	it and see what we could do better, but yeah,	
25	it's not I don't think it's reportable.	

MS. HALLAM: Yeah. So I'll read it again. It says "absent the medical condition."

So someone who is released because of their medical condition, I think we can agree, would be in the jail if not for that medical condition, right?

JUDGE EVASHAVIK DILUCENTE: Yeah,
but you're saying released, like released from -I'm hearing released from the jail and taken to
the hospital still under the care of the jail.

MS. HALLAM: It does not say that at all. It says "if absent the medical condition they would have been in jail, it's reportable."

Because otherwise, the jail would just do what they did a couple years ago and just ask for people to be released so that they wouldn't have to report deaths that happened in the hospital.

JUDGE EVASHAVIK DILUCENTE: Okay.

I don't know. I'm just -- I thought you guys

were both referring to release in a different

context, and I was trying to straighten it out,

and obviously, I've muddied the water.

MS. HALLAM: No, it's okay. You're not. I want you to understand it too because it's something that we have been talking about

for a really long time.

INTERIM WARDEN DADY: To what

extent would you, like -- is the jail's

responsibility. You know, I mean, you could have

somebody that's released, gets out of the

hospital, but then several months later passes

away. Is that on the jail to report that?

I guess we could ask the Department of Justice to come and talk to us if you'd like.

MS. HALLAM: I don't really know.

But yeah, that's kind of was where

I was leading with my question is this is very

clear that if absent the medical condition, they

would have been in jail, which is every single

situation in which they are released for their

medical condition, it is a reportable death.

So I'm trying to get us to all kind of agree that we should be reporting those deaths and that the Jail Oversight Board should be notified about those deaths.

JUDGE EVASHAVIK DILUCENTE: I don't know the answer to that. I'm not disagreeing with you necessarily, but I think it's the word "released."

MS. HALLAM: Uh-huh.

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1	JUDGE EVASHAVIK DILUCENTE: In
2	other words, if somebody has a medical condition
3	and the jail sends let's not use release.
4	MS. HALLAM: Right.
5	JUDGE EVASHAVIK DILUCENTE: The
6	jail transfers that individual to the hospital.
7	MS. HALLAM: And doesn't release
8	them you're saying.
9	JUDGE EVASHAVIK DILUCENTE: Yes.
10	They just simply transfer them to the hospital.
11	The jail's responsible for them while they're in
12	the hospital, right?
13	MS. HALLAM: Uh-huh. And then what
14	happens often is close to their death, when the
15	medical professionals determine that they're
16	going to die, the jail the Courts and the jail
17	will work to release that person from custody so
18	that their families can be close to them so that
19	they don't have the restrictions
20	JUDGE EVASHAVIK DILUCENTE: Okay.
21	Okay.
22	MS. HALLAM: that's placed on
23	incarcerated individual while they're in the
24	hospital.
25	And so that sounds like, in good

1 faith and everything, you know. But what I'm 2 trying to understand is how we, as the Jail 3 Oversight Board, can do our job to ensure that we 4 are conducting oversight of people who -- what 5 killed them happened in the jail. That is under 6 our preview, absolutely. Just because the courts 7 released them because of what happened to them in 8 the jail doesn't mean it's out of your hands. 9 INTERIM WARDEN DADY: Yeah. 10 don't think that you can say that, you know, the 11 reason for the -- them being in the hospital is 12 because of being in the jail, though. 13 MS. HALLAM: But the thing happened 14 to them in the jail. 15 INTERIM WARDEN DADY: It could be a 16 preexisting --17 Sure. Of course. MS. HALLAM: 18 JUDGE EVASHAVIK DILUCENTE: 19 case is different. 20 MS. HALLAM: Yeah, of course. But 21 it could -- I don't mean that the jail killed 22 them --23 INTERIM WARDEN DADY: That's what 24 I'm hearing.

MS. HALLAM: -- directly. I mean,

25

1 no, the thing that killed them happened to them 2 in the jail. If they have a heart attack in the 3 jail, that happened to them in the jail. We, as 4 the Oversight Board, need to investigate that. 5 Do you agree? 6 JUDGE EVASHAVIK DILUCENTE: That 7 doesn't mean that the jail caused the heart 8 attack. 9 MS. HALLAM: Right. But if they 10 have a heart attack in the jail and go to the 11 hospital, do you believe that the Jail Oversight 12 Board should have oversight to investigate that? 13 JUDGE EVASHAVIK DILUCENTE: I think 14 the answer --15 JUDGE BIGLEY: Can I -- can I just 16 say this. I would say that this is like the 1 in 17 20 million where you have an actual person who 18 dies, or I would say --19 MS. HALLAM: It happens way more 20 often than that, Judge Bigley. 21 JUDGE BIGLEY: Well, hold on. 22 This isn't -- it's not appropriate 23 for the audience to chime in. I would say this, 24 though. It would not -- most of the time. Most 25 of the time when this happens and people -- we're

1 talking about people who are pregnant and other 2 things, a lot of times this isn't something 3 that's imminent -- I'm talking about the 4 hospital. 5 A lot of times, and we know how 6 often this happens when people go and are 7 transferred to the hospitals and people are --8 and 6-A are done. I don't know that necessarily 9 the jail then knows what happens because they're 10 released. 11 JUDGE EVASHAVIK DILUCENTE: Or gets 12 the information. 13 JUDGE BIGLEY: Do you know what I'm 14 saying? 15 MS. HALLAM: That was where I was 16 getting to with my questioning is the jail has to 17 know because they have to report it. So I was 18 trying to get to how do they find out. 19 JUDGE BIGLEY: But what I'm saying, 20 though, is I don't know that they have the right 21 to know. 22 JUDGE EVASHAVIK DILUCENTE: 23 JUDGE BIGLEY: Once they've

released them, that the jail can call all they

want and find out what happened to Joe Blow, and

24

1 the hospital doesn't necessarily have to tell 2 them because they're no longer an inmate. 3 MS. HALLAM: Right. And so that 4 would lead them to directly violate the 5 Department of Justice and the Federal Justice 6 Death in Custody Reporting Act. 7 JUDGE EVASHAVIK DILUCENTE: Okav. 8 JUDGE BIGLEY: Fine, because then 9 the DOJ can say to them, well -- they can say to 10 the DOJ, well, I don't know what happened to 11 Joe Blow because he's no longer an inmate, and no 12 one would tell us if you get what I'm saying? 13 MS. HALLAM: So do the courts not 14 keep track of -- if the people enter their courts 15 Is that something that the courts ever --16 like, how do you find that out? 17 JUDGE BIGLEY: Somebody eventually 18 can tell us, but I can tell you right now, if a 19 defendant calls and says to me I'm in Gateway and 20 then hangs up, and we immediately call Gateway 21 and we say, is Joe Blow there? They'll say, 22 we're not telling you anything. 23 MS. HALLAM: Uh-huh. 24 JUDGE BIGLEY: Like, we can't --25 because of HIPAA, as you know, we can't call

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1	places.
2	MS. HALLAM: Yes.
3	JUDGE BIGLEY: Well, if the jail
4	if I send a 6-A and the jail releases an inmate
5	at 11 p.m.
6	MS. HALLAM: Uh-huh.
7	JUDGE BIGLEY: The jail could call
8	11:30 because they heard he died and say did the
9	inmate die and they'll say, we're not telling you
10	anything.
11	MS. HALLAM: Yeah. I knew that
12	JUDGE BIGLEY: He's not an inmate.
13	MS. HALLAM: but I just wanted
14	to kind of get them to admit that, yeah.
15	JUDGE EVASHAVIK DILUCENTE: Can I
16	summarize this?
17	JUDGE BIGLEY: Can you see what I'm
18	saying?
19	JUDGE EVASHAVIK DILUCENTE: Please.
20	JUDGE BIGLEY: This can be a little
21	more problematic than
22	MS. HALLAM: Yes.
23	JUDGE BIGLEY: I think this is
24	something we should look into.
25	MS. HALLAM: I agree.

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1	JUDGE EVASHAVIK DILUCENTE: Okay.
2	What I think this is is just a difference of
3	opinion, okay. The jail's position is if the
4	person is in the hospital and the court releases
5	them, they're no longer under our care and our
6	watch.
7	Ms. Hallam, you are saying that if
8	the condition happened in the jail
9	MS. HALLAM: They have to report
10	it.
11	JUDGE EVASHAVIK DILUCENTE: then
12	you're responsible for reporting it.
13	MS. HALLAM: Correct.
14	JUDGE EVASHAVIK DILUCENTE: We need
15	a legal opinion.
16	Mr. Bacharach, do you agree with
17	the jail's position?
18	MR. BACHARACH: I do.
19	JUDGE EVASHAVIK DILUCENTE: Okay.
20	MS. HALLAM: Shocker.
21	JUDGE EVASHAVIK DILUCENTE: So
22	that
23	JUDGE BIGLEY: So then what you do
24	is report them then. Report them to the DOJ.
25	JUDGE EVASHAVIK DILUCENTE: I mean,

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1	that's the jail's position so you either we
2	could ask a solicitor when we get a solicitor.
3	MS. HALLAM: Uh-huh.
4	JUDGE EVASHAVIK DILUCENTE: But
5	that's the end of that today.
6	MS. HALLAM: I have a better
7	solution. I think that if the jail reported the
8	6-A releases for medical reasons to us, as the
9	Oversight Board, maybe that's kind of a middle
10	ground where we can say, okay, we can't find out
11	what happens after, but we can find out that they
12	were released because they were sent to the
13	hospital.
14	JUDGE EVASHAVIK DILUCENTE: Okay.
15	MS. HALLAM: Is that kind of a good
16	compromise?
17	JUDGE EVASHAVIK DILUCENTE: Can the
18	jail can you report to us
19	INTERIM WARDEN DADY: That's
20	medical information then, correct? We're back to
21	providing medical information.
22	JUDGE BIGLEY: Which I don't
23	JUDGE EVASHAVIK DILUCENTE: Well,
24	you couldn't say they were transferred to the
25	hospital

JUDGE EVASHAVIK DILUCENTE:

Yes.

1 MS. HALLAM: Well, you don't even 2 need to tell us they were at the hospital. 3 they were a 6-A release because of a medical. MR. BACHARACH: Well, after this 4 5 happens in the hospital, you know, they don't 6 have to release the information to the court. 7 JUDGE EVASHAVIK DILUCENTE: Right. 8 Exactly. 9 MR. BACHARACH: So the Board would 10 know about that. 11 JUDGE EVASHAVIK DILUCENTE: Well, 12 so would the jail know about it because the jail 13 knows we don't have to guard them anymore. 14 MR. BACHARACH: You can tell -- I 15 mean, they could tell you that if somebody was in 16 the hospital and they were released. 17 MS. HALLAM: That's all she's 18 asking for. Is that -- Mr. Bacharach, do you 19 have a problem if the jail provides this Board 20 with that information? 21 MR. BACHARACH: I don't have a 22 problem with the jail providing information --23 just information that somebody was released while 24 they were in the hospital as long as we're not 25 talking about the reason why they were released.

1	152 JUDGE EVASHAVIK DILUCENTE: That's
2	fine.
3	MS. HALLAM: Sure.
4	JUDGE EVASHAVIK DILUCENTE: Okay.
5	Please provide that, and let's move on.
6	MS. HALLAM: Thank you. Thank you
7	very much. I appreciate that.
8	Okay. Now, I lost my page my
9	thing a little bit.
10	Yeah, and actually, I did print out
11	when in the January 2021 meeting, we had all
12	agreed that any time somebody goes to the
13	hospital, the Board would be notified and that's
14	never happened. So if we could start that
15	Warden Dady, you would be like at the top of my
16	list of favorite wardens that's of the ACJ.
17	MR. O'CONNOR: Oh, Councilwoman,
18	remember, we do have that Motion that has been
19	drafted, so we can
20	MS. HALLAM: Drafted and never
21	introduced.
22	MR. O'CONNOR: We can send it to
23	MS. HALLAM: Never been introduced
24	for a vote, Controller O'Connor.
25	MR. O'CONNOR: We can send it to

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1	new Board members. You guys can look before the
2	next Board meeting.
3	MS. HALLAM: I would love that.
4	JUDGE EVASHAVIK DILUCENTE: So
5	you're saying that that was not done?
6	MS. HALLAM: No, it was. Here.
7	MR. O'CONNOR: We drafted one. I
8	don't remember if it was 2021.
9	MS. HALLAM: Do you want to read
10	the transcript? The top is Judge Clark when she
11	was the Chair of the Board, and then the bottom
12	is Warden Harper agreeing to do it.
13	JUDGE EVASHAVIK DILUCENTE: Okay.
14	So it wasn't necessarily a Motion.
15	MS. HALLAM: It wasn't. It was
16	just an agreement.
17	JUDGE EVASHAVIK DILUCENTE: But the
18	jail
19	MR. O'CONNOR: 2021 I can't speak
20	to.
21	JUDGE EVASHAVIK DILUCENTE: Okay.
22	MS. HALLAM: You can keep that if
23	you'd like.
24	JUDGE EVASHAVIK DILUCENTE: Okay.
25	All right. Will you please also include in your

1 report the number of defendants who are sent to 2 the hospital, please, or for medical treatment. 3 MS. HATLIAM: Uh-huh. 4 Okav. When a jail death occurs, 5 who all is notified? So now we're back to they 6 weren't released, getting away from that. 7 all is notified when a death in the jail occurs? 8 So Jail Oversight Board, next of kin. Who else 9 is on that list? 10 CHIEF DEPUTY BEASOM: You're saying 11 in-custody deaths within the facility? 12 MS. HALLAM: Uh-huh. Or I mean, it 13 could be outside too but in-custody deaths. 14 CHIEF DEPUTY BEASOM: Yeah. So if 15 it's in a hospital for an in-custody death, the 16 Healthcare Department is notified. They notify 17 the jail administration, okay? 18 Jail administration begins its 19 protocol with notifying County Homicide 20 Detectives. They would need to report to the 21 facility or to the hospital to start their 22 investigation. Next of kin as you said, the Jail 23 Oversight Board. 24 MS. HALLAM: Anyone else? The 25 Medical Examiner? Anybody like that?

1 CHIEF DEPUTY BEASOM: The homicide 2 detectives take care of that notification. 3 MS. HALLAM: Okay. And they also -- so the homicide detectives notify the 4 5 next of kin and the Medical Examiner, or do yinz 6 notify the next of kin? 7 CHIEF DEPUTY BEASOM: We make 8 attempts to notify the next of kin through our 9 Chaplain's Department or emergency contact. 10 MS. HALLAM: Okay. Oh, yeah. 11 Sorry or emergency contact. The people can 12 designate that. Yep. 13 Okay. Thank you very much. 14 think I'm almost done but let me just make sure 15 before I like finalize that. 16 Oh, I did have a question about 17 strip searches, specifically if there's a policy 18 for when those are used versus just regular cell 19 tosses. I've been getting reports lately of like 20 an excessive number of strip searches happening 21 on certain pods. 22 CHIEF DEPUTY BEASOM: I mean, so 23 anybody incarcerated within the facility is 24 subject to search at any time. 25 MS. HALLAM: I know. Uh-huh.

1 CHIEF DEPUTY BEASOM: I don't know 2 what else you're trying --3 MS. HALLAM: But I mean, do you 4 just do it for fun, or do you -- is there a thing 5 that triggers strip searches, you know? 6 CHIEF DEPUTY BEASOM: We're 7 obviously looking to see if anything is 8 concealed. 9 MS. HALLAM: Right. But does 10 something have to happen to trigger it, or are 11 they random strip searches? 12 CHIEF DEPUTY BEASOM: They can be 13 random, yes. 14 MS. HALLAM: Okay. And is there --15 how do you make sure that one pod specifically or 16 certain officers aren't specifically targeting 17 certain pods, certain people? Is there some sort 18 of protocol this is when we do a strip search? 19 CHIEF DEPUTY BEASOM: It's usually 20 during searches. I mean, cell searches, housing 21 unit shakedowns, you know, those things. 22 MS. HALLAM: Okay. Do you keep 23 track of when pods are strip searched to be able 24 to see, like, hey, this pod has had 30 strip 25 searches in the past month, this one has had

1 none. Why the discrepancy? 2 CHIEF DEPUTY BEASOM: So if you see 3 any -- any lockdown forms that detail shakedowns, 4 that would then imply that everybody in that area 5 was strip searched. 6 MS. HALLAM: I've never seen a 7 lockdown form, so. 8 CHIEF DEPUTY BEASOM: They are 9 available --10 MS. HALLAM: I've never seen it. 11 CHIEF DEPUTY BEASOM: -- at the 12 jail, Ms. Hallam. 13 MS. HALLAM: That's what you say, 14 yeah. 15 I think that's -- oh, the only 16 other -- I have before, and I am really done, the 17 only -- the last -- oh, no. Sorry. I lied. Ι 18 have two more. 19 I know somebody mentioned that we 20 have -- we needed 100 more officers. That came 21 out of Controller O'Connor's audit. I think John 22 brought it up earlier when he was talking. 23 For -- can -- a piece of information I'd like to 24 get in your reports for the next meeting is the

number of shifts that officers and healthcare

staff were forced to work overtime each month. 1 2 I'm talking about forced overtime specifically. 3 So I would just like that broken down. Again, 4 don't need any names. Don't need anything like 5 that, just, you know, 100 shifts of forced 6 overtime for COs. 100 shifts of forced overtime 7 for healthcare staff. 8 DEPUTY WARDEN TOMA: Ms. Hallam, 9 point of note. Healthcare can't be forced. It's 10 in State law, so there --11 MS. HALLAM: It's only officers. 12 Thank you. Then you can skip that second part. Just the number of shifts -- because I was going 13 14 to say officers, but I guess the same officer 15 could get it 20 times. So the number of shifts 16 of forced OT for officers each month. 17 CHIEF DEPUTY BEASOM: Are you 18 talking the number of shifts that are accepted as 19 overtime? 20 MS. HALLAM: I don't know. What's 21 the difference? 22 CHIEF DEPUTY BEASOM: People can 23 refuse. Officers can refuse overtime using, you 24 know, federally protected leave or whatever it 25 may be.

1	159 MS. HALLAM: Yeah. No, like how
2	many shifts are you trying to force people to do
3	
	overtime?
4	JUDGE EVASHAVIK DILUCENTE: Just
5	say request instead of force.
6	MS. HALLAM: Sure, request. Thank
7	you. Thank you for clarifying that. Request.
8	And then my last thing is, each
9	month, I would also like copies of the any
10	grievances submitted for that month.
11	DEPUTY WARDEN TOMA: That's a
12	personnel issue, I don't think we can do that.
13	MS. HALLAM: If you read what the
14	statute
15	DEPUTY WARDEN TOMA: I understand
16	what the thing has
17	MS. HALLAM: What the statute says.
18	DEPUTY WARDEN TOMA: But I I
19	would like to confer with our County Solicitor on
20	that matter. I just
21	JUDGE EVASHAVIK DILUCENTE:
22	Mr. Bacharach.
23	MS. HALLAM: He hates when you do
24	that, Judge.
25	MR. BACHARACH: I'll have to get

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1	back to you on that. I don't I don't handle	
2	employee grievances. I don't know on that.	
3	MS. HALLAM: I don't	
4	JUDGE EVASHAVIK DILUCENTE: Okay.	
5	Well, will you ask will you ask	
6	DEPUTY WARDEN TOMA: You're not	
7	talking about employee grievances. You're	
8	talking about inmate grievances?	
9	MS. HALLAM: I'm talking about	
10	incarcerated individuals' grievances. Sorry.	
11	Maybe I should have clarified.	
12	DEPUTY WARDEN TOMA: Oh, all right.	
13	We were going down employee files.	
14	MS. HALLAM: I thought you were	
15	trying to say that because sometimes they're	
16	about employees that you won't give them to us.	
17	DEPUTY WARDEN TOMA: No. You were	
18	talking about Use of Force. You were talking	
19	about employees. I'm sorry. I made	
20	MS. HALLAM: I'm sorry. I should	
21	have clarified. I was jumping all around.	
22	DEPUTY WARDEN TOMA: Yeah.	
23	MS. HALLAM: Yeah, I would just	
24	like copies of the grievances submitted by	
25	incarcerated individuals each month.	

JUDGE EVASHAVIK DILUCENTE: And on that topic, I know that Karen had asked for the incarcerated individuals to be permitted to submit their grievances to her on their iPads.

Has any progress been made on that?

DEPUTY WARDEN TOMA: We currently don't have that ability. As we've mentioned in other meetings, this current vendor's contract will expire next year, and that is definitely something when we put out this RFP that we will take consider -- we want to include that as a requirement.

JUDGE EVASHAVIK DILUCENTE: Is this just a technology problem?

DEPUTY WARDEN TOMA: So it's a bunch of different things. It's security, it's access, because that information -- like, I could go back to the survey that their -- the vendor controls the tablet. Whatever is put on there has to meet certain security restrictions and how communication goes out.

So right now, if a text message went out, that's for fee. So for communication to go out, there currently isn't a system like that by this developer. So they would have to

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	develop it, and that is not in their roadmap. So
2	it is something that we would want to include
3	moving forward
4	JUDGE EVASHAVIK DILUCENTE: Okay.
5	DEPUTY WARDEN TOMA: that they
6	have that capability.
7	JUDGE EVASHAVIK DILUCENTE: So they
8	can't communicate out at all on the
9	DEPUTY WARDEN TOMA: On the not
10	without not outside our current system that's
11	utilized within the facility and not outside if
12	it's not for fee.
13	JUDGE EVASHAVIK DILUCENTE: Okay.
14	But why couldn't Karen why couldn't
15	couldn't you put a set up a mailbox for her in
16	the system
17	DEPUTY WARDEN TOMA: It's not a
18	it's not that type of a
19	JUDGE EVASHAVIK DILUCENTE: Well,
20	what I don't follow you. And I'm not very
21	savvy on technology, but are you saying that they
22	can communicate with people in your system?
23	Could they send you an e-mail?
24	DEPUTY WARDEN TOMA: It's not an
25	e-mail. So like

1 JUDGE EVASHAVIK DILUCENTE: Or a 2 communication? 3 DEPUTY WARDEN TOMA: It's a 4 communication --5 MS. HALLAM: Or even that they 6 submit their grievances in. 7 DEPUTY WARDEN TOMA: But that goes 8 into our secure OMSE System. So that is an 9 interface that was built so that it can 10 communicate with our database system. 11 JUDGE EVASHAVIK DILUCENTE: So we 12 couldn't carve something out --13 DEPUTY WARDEN TOMA: Not with --14 not without having security concerns of accessing 15 other information. 16 JUDGE EVASHAVIK DILUCENTE: What 17 kind of security concerns? 18 DEPUTY WARDEN TOMA: So all the 19 other -- all the other information that's within 20 that system. So for example, I'll use the 21 courts. We share information with the courts, 22 but it goes out. And you guys don't have access 23 into our system as it is there. It's a very 24 specific information that goes outwards, and that 25 would have to be built. So is there an option to

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1	have it built out? Sure. Somebody wants to	
2	undertake that and have that built out and pay	
3	for that to be built out and work with the	
4	vendor?	
5	But again, that's why we want to	
6	include that in this next RFP, so whoever comes	
7	in will have that capability.	
8	JUDGE BIGLEY: Can I suggest	
9	something?	
10	JUDGE EVASHAVIK DILUCENTE: Yeah.	
11	JUDGE BIGLEY: We have laptops down	
12	there that are for use for the defendants for	
13	their discovery.	
14	JUDGE EVASHAVIK DILUCENTE: But	
15	there's so few of them. I mean, there's not that	
16	many of them. But what you're suggesting	
17	JUDGE BIGLEY: Couldn't we supply	
18	another one for the use for the jail liaison that	
19	they could leave there that people could store	
20	things on there?	
21	JUDGE EVASHAVIK DILUCENTE: Oh, a	
22	laptop designated for that purpose?	
23	JUDGE BIGLEY: Yes. Yes.	
24	JUDGE EVASHAVIK DILUCENTE: Would	
25	that work if we had a if we provided a laptop?	

peputy Warden Toma: I -- that -yeah. I don't see how logistically that would be
able to work because it would have to be moved
around the entire facility for somebody to log on
and --

JUDGE BIGLEY: Why couldn't it be in one spot for the residents to go to -- if they could go there specifically like -- you know, like the suggestion box at the restaurant that we used to have a long time ago? And they could lodge their complaints there and put it on the laptop, and then somehow Sangeep could work something out?

I'm just saying, listen, let's -everyone's answer is always that something can't
be done, and then I think somebody can always
think --

DEPUTY WARDEN TOMA: No.

TUDGE BIGLEY: And I didn't mean that to be disrespectful to you. I'm just saying if Court Administration provided a laptop that was specifically for use, then the inmates could -- or even more than one -- I don't know how big it is down there -- never been. Sorry. I've never been down there.

MS. HALLAM: You're going to go

166 1 soon. 2 JUDGE BIGLEY: I know. I'll be 3 there, I guess. But then people could do it on 4 there. If they can't use their tablets, I'm sure 5 Court Administration could provide something. 6 I'm sure Ms. Hallam will provide the funding for 7 it. 8 MS. HALLAM: Absolutely. 9 JUDGE BIGLEY: Won't you, 10 Ms. Hallam? 11 MS. HALLAM: Absolutely. 12 JUDGE BIGLEY: And then therefore there could be an electronic means to do this, 13 14 and that will satisfy everybody. 15 JUDGE EVASHAVIK DILUCENTE: 16 question is, is there a location that you can 17 think of where inmates could go to access this 18 laptop and type their grievance? 19 MS. HALLAM: We have a library. 20 Wouldn't that be great if they went there? 21 JUDGE EVASHAVIK DILUCENTE: Yeah. 22 Isn't there some like recreation -- what -- isn't 23 there some room that everybody goes to?

DEPUTY WARDEN TOMA: No.

MS. HALLAM: Medical?

24

1 DEPUTY WARDEN TOMA: No. 2 CHIEF DEPUTY BEASOM: Logistically, 3 to move 1,600 people on average to one laptop is 4 virtually impossible. 5 MS. HALLAM: But it wouldn't be 6 1,600 people. 7 JUDGE BIGLEY: Right. Well, 8 let's --9 CHIEF DEPUTY BEASOM: If everybody 10 in the jail needs access to this thing --11 JUDGE BIGLEY: Let's think about 12 it. 13 JUDGE EVASHAVIK DILUCENTE: A11 14 right. We're going to think about it. 15 Okay. I'm really concerned about 16 the delay in getting medical care and mental 17 health care. Is it strictly a staffing issue, or 18 is there some way we can shorten this? I mean, 4 19 days' wait. Now it's 2 days this month for 20 mental health sickness. Mental health specialist 21 last month it was 6 days longest wait. 22 month it was 10 days. That's a really long time. 23 Last month, 7 days' wait for 24 medical care. This month, it's 2 days. But it's 25 so long. I mean, how come?

1 DHSA KOLLAR: Well, I can

understand that the sick call queue is large, and in realtime, when the nurse goes to deliver the meds, they can address some of the issues. I can understand that.

There is also -- if there is an issue, the -- the patient can go to the corrections officer. The corrections officer can call a medical emergency. There can be immediate care. There can be phone calls to triage the concern. So sick call isn't the only way they get medical care.

JUDGE BIGLEY: But it still remains a staffing issue.

JUDGE EVASHAVIK DILUCENTE: Or is it not then?

DHSA KOLLAR: Well, one of those items is the psychiatric queue, and they're using it for follow-up care, so they put more sick calls in than -- because the providers are now using it. And it would be nice to start as we develop our Behavioral Health with our Director of Psychiatric -- a Psychiatry to separate those out so you can see really what is the realtime reaction to Behavioral Health addressing, because

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1	I think it's overinflated with the follow-up
2	calls.
3	JUDGE EVASHAVIK DILUCENTE: Okay.
4	But I'm hearing that you are going to at least
5	work on the psychiatric calls.
6	DHSA KOLLAR: Uh-huh. They're the
7	biggest, yeah.
8	JUDGE EVASHAVIK DILUCENTE: Okay.
9	Can you break down this report at all or get
10	us it just really alarms me when and I'm
11	hearing you say, well, okay, 7 days. They might
12	not really wait 7 days because they may have seen
13	the nurse, or they may have done something else.
14	DHSA KOLLAR: Uh-huh.
15	JUDGE EVASHAVIK DILUCENTE: But if
16	that's the case, then it's really not 7 days, is
17	it, because they received treatment? So maybe
18	DHSA KOLLAR: Right.
19	JUDGE EVASHAVIK DILUCENTE: the
20	report is inaccurate.
21	DHSA KOLLAR: It could be, because
22	I do know that when I do some audits, it is that
23	the patient was seen. There's a progress note.
24	There's medication given, and the sick call isn't
25	always resolved.

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1	We do have a lot of work, and we	
2	did a lot of backlogging since the last 6 months	
3	to a year, and we're still working on that.	
4	JUDGE EVASHAVIK DILUCENTE: Okay.	
5	Well, maybe we could make this more accurate	
6	somehow because it looks horrible in my view.	
7	DHSA KOLLAR: Uh-huh.	
8	JUDGE EVASHAVIK DILUCENTE: Oh,	
9	yeah. No. I do have one more question, though.	
10	Did Councilwoman Hallam pass the agility test?	
11	MS. HALLAM: No, I didn't take it.	
12	JUDGE EVASHAVIK DILUCENTE: Why	
13	not?	
14	MS. HALLAM: I don't think I ever	
15	knew when it was. I went down to see the the	
16	thing, and they were on lunch.	
17	JUDGE EVASHAVIK DILUCENTE: You	
18	just didn't want to take it.	
19	MS. HALLAM: I'm not scared of it.	
20	I'll take it.	
21	JUDGE EVASHAVIK DILUCENTE: You	
22	knew you'd flunk.	
23	MS. HALLAM: I'll take it. I went	
24	down to see it, though, in my visit, and they	
25	were on lunch, so I didn't even get to see the	

171 people. But I saw like the dummies and stuff set 1 up in the pod for their like comrades. 2 3 JUDGE EVASHAVIK DILUCENTE: Well, 4 I'd like a full report on when that happens. 5 MS. HALLAM: Yes. 6 JUDGE EVASHAVIK DILUCENTE: 7 We missed two members of the public. 8 apologize. I just got the sign-in sheet, the 9 last one. 10 Carlos Thomas. 11 PUBLIC COMMENT (cont.) 12 MR. THOMAS: Good evening. I guess 13 the first thing I'll ask is there an updated 14 procedure on the sign-in sheet process so that we 15 don't keep missing people and the appropriate 16 time and/or miss the online comments? That's my 17 first question. 18 JUDGE EVASHAVIK DILUCENTE: I don't 19 know, but I'll look into it because I don't know 20 how these sheets are distributed, quite frankly. 21 But I'll find out. 22 MR. THOMAS: Yeah, but that's, I 23 mean, more or less why I asked. 24 JUDGE EVASHAVIK DILUCENTE: Okay. 25 Secondly, I wanted to MR. THOMAS:

know if there were any updates on -- and they
kind of provide some purview. I remember the
jail last week -- last month, I commented on the
amount of time it takes to process. And the jail
had conveniently blamed it on the magistrates,
which I counted we have over 50-some odd
magistrates throughout Allegheny County, so I'm
sure that at any one point in time right now,
somebody could be sitting to get through
processing.

So I don't think that that's a problem, but is there any other alternative to speed up processing so that it doesn't take an extreme amount of time to be processed in and out of the jail, whether you're innocent and/or waiting to be proven innocent? But I know a lot of situations occur within that 12- to 15-hour time period in which you could be waiting to see a magistrate, waiting to see medical, waiting to see any one of the number of things that you need to figure out where you're going next.

I digress.

JUDGE EVASHAVIK DILUCENTE: I -- there is a committee on pretrial procedures in the Criminal Division, and I -- I know they're

1 looking into that. How long does it take --2 MR. THOMAS: If I may suggest, this 3 would be before you even -- so before you're arraigned, there's a period in which you're 4 5 sitting in a holding cell. After your arrest, 6 you're brought to the jail by law enforcement. 7 JUDGE EVASHAVIK DILUCENTE: I know. 8 MR. THOMAS: So there's that time 9 period. 10 JUDGE EVASHAVIK DILUCENTE: 11 What we fixed is that you get credit for the 12 time when you walk in the jail. We fixed that. 13 MR. THOMAS: Okay. 14 JUDGE EVASHAVIK DILUCENTE: 15 didn't necessarily address how long does that 16 take. I would like the jail to please look into 17 can we shorten that time at all? Can you 18 streamline some process to shorten that time? 19 Same as the discharge time. 20 I hear you that it's -- you know, 21 usually within 48 hours, but that's two more days 22 that somebody is sitting in jail after they've 23 been released. 24 JUDGE BIGLEY: They accrue time. 25 JUDGE EVASHAVIK DILUCENTE: Ιn

addition to that, think about the money. I mean, it's like a waste of money. Like, we got to shorten that up somehow. I hear that you have -- have to go through these various checks, but I can't believe that it would take 48 hours to do these checks.

MR. THOMAS: I will also -- I will also add that during that time that you don't have an actual bed to sleep in, you are sleeping on a floor inside of a holding cell. You are given a bologna sandwich and bread. So for 48 hours from when the topic -- largely today was nutrition that -- dietetics. I would be concerned whether a person is getting the proper nutrition that they need to even function as a person, to make cognitive decisions before they even go into arraignment.

JUDGE EVASHAVIK DILUCENTE: Uh-huh.

MR. THOMAS: You're given a bologna sandwich, six cookies and a juice.

JUDGE BIGLEY: I appreciate it, but because of your comments last time, we're now seeing as of today -- was it today, Sue?

MS. HALLAM: What?

JUDGE BIGLEY: As of today, we're

seeing it in the -- we're now seeing --

JUDGE EVASHAVIK DILUCENTE: That's

for credit for time served.

when I pull up the screen when I'm sitting at my desk, I see what time somebody walked in the door, how long he sat there, what time the Complaint was filed, what time you were arraigned. I see the time you got, right? Am I right? You know, Warden. I see the times of everything. I can see. And so they're expanding all the information that I can see. And as part of that, now Court Administration is seeing how long these time periods are.

And as part of that I think what happens is the people that see that see how long these time periods are in each of these cases, and it makes them question, okay, what is -- why are these times so long?

Keep in mind that isn't always the jail's issue either because it's also the court because many people who are in this process don't end up in jail. They're arraigned, and then they're released.

MR. THOMAS: I think that's kind of

1 the concern is that you are sitting for so long 2 to get released, and by the time you get 3 released, you don't --4 JUDGE BIGLEY: The vast majority of 5 people, though, don't end up going to jail. 6 end up being released. So but what I'm saying, 7 though, is that this system that we're seeing 8 now, that we're all seeing this, is making 9 everybody that's in the whole process question 10 how can we improve? How can we cut these times 11 down? 12 MR. THOMAS: I appreciate that. Wе 13 appreciate that. 14 JUDGE BIGLEY: Who is all part of 15 this process that we're seeing all of these 16 times, and how can we make it less? And that all 17 started with your comments. 18 MR. THOMAS: Thank you. 19 JUDGE BIGLEY: And we're all seeing 20 it. 21 MR. THOMAS: I appreciate that. 22 JUDGE BIGLEY: So thank you. 23 JUDGE EVASHAVIK DILUCENTE: 24 you, sir. 25 Anna Yatsko.

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1	MS. HALLAM: Also, Judge, while	
2	Anna is walking up, can I maybe suggest that	
3	going forward, we keep the Public Comment sheets	
4	out there until Public Comments start, just	
5	because I wonder if maybe that's why we're	
6	missing folks?	
7	JUDGE EVASHAVIK DILUCENTE: That's	
8	fine.	
9	MS. HALLAM: Okay.	
10	JUDGE EVASHAVIK DILUCENTE: Does	
11	anybody have a problem with that?	
12	JUDGE BIGLEY: No, that's fine.	
13	JUDGE EVASHAVIK DILUCENTE: Okay.	
14	MS. INNAMORATO: Put it in the	
15	bylaws.	
16	MS. HALLAM: Yeah. I can't wait.	
17	JUDGE EVASHAVIK DILUCENTE: I'm	
18	hitting start.	
19	MS. YATSKO: Hi, my name is Anna	
20	Yatsko, A-N-N-A Y-A-T-S-K-O. I'm here speaking	
21	exclusively in my personal capacity.	
22	The first thing that I want to	
23	raise is that only one person from one renewal	
24	facility is here without knowledge of what	
25	happens at the other facility. I think once a	

month, in order to best understand, there should be one person from each facility.

Based on the comments I heard today, I have a concern that the Jail Oversight Board doesn't have a physical, unredacted, complete copy of all the policies and procedures at the jail. That is very concerning to me that you have to go to the jail to obtain that --blind 100 percent trust in everything is exactly why we're here. So I would really appreciate it if a third party were to hold onto all those rules.

Speaking of rules, I think there was generally something that was raised today, not in terms of anything specific that maybe people who are on medical leave or in the medical pod don't have access to tablets. So generally, I would love for maybe those policies to be brought up to us, because I looked at the mail policy, and I looked at the tablet policy, and while they're specified that there's no tablets in the medication line. It doesn't say anything about medical leave.

As for what Tanisha said about transparency being an issue, certainly, Use of

Force transparency, third-party reports are very valuable. I remember in the death of Gerald -- well, first of all, I remember when the names were being read and nobody stood. Bethany stood.

And I would also like to say I remember when former Warden Harper said that in the death of Gerald Thomas, he couldn't answer questions about that because of the threat of litigation. Many of these deaths, the civil liability has passed. The statute of limitations is up, and I would absolutely love to see full details with interviews and transcripts investigations by a third party on the deaths of the jail where now, based on what was previously barring comment, that concern is up.

I will say I personally knew someone who was housed in the Allegheny County Jail who went home, got to see his daughter one last time, and died the next day, and that wasn't on the list.

Thank you.

JUDGE EVASHAVIK DILUCENTE: Thank

23 you.

OLD BUSINESS

JUDGE EVASHAVIK DILUCENTE: Okay.

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1	Old Business. I believe everything on here was	
2	covered in the Warden's Report.	
3	MS. HALLAM: Uh-huh.	
4	JUDGE EVASHAVIK DILUCENTE: Does	
5	anybody disagree?	
6	JUDGE BIGLEY: No.	
7	MS. HALLAM: No.	
8	JUDGE EVASHAVIK DILUCENTE: Okay.	
9	The next item is the Allegheny County Jail and	
10	alternative housing population statistics.	
11	I would ask, do I have a Motion	
12	that we can just henceforth approve that report	
13	and incorporate it into our minutes without	
14	reading it?	
15	MS. HALLAM: Oh, I like that idea.	
16	JUDGE BIGLEY: I like it too.	
17	Second well, yeah, second.	
18	JUDGE EVASHAVIK DILUCENTE: Okay.	
19	Wonderful. All those in favor?	
20	(Chorus of ayes.)	
21	JUDGE EVASHAVIK DILUCENTE:	
22	Opposed?	
23	(No response.)	
24	JUDGE EVASHAVIK DILUCENTE: Okay.	
25	Wonderful.	

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, February 1, 2024'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