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# WOODBOURNE CORRECTIONAL FACILITY: 2012

Woodbourne is a medium-security prison for men committed to the Department of Corrections and Community Supervision (DOCCS) located in the town of Woodbourne, in Sullivan County New York, approximately 90 miles northwest of New York City. Woodbourne was built under the Work Projects Administration, a New Deal program created to combat Depression-era unemployment.

At the time of our visit to Woodbourne, the prison population was 824, with a capacity for 849. There were 779 persons residing in general confinement. Woodbourne is unique in that it is a medium-security facility in New York with both dormitory and cellblock (for 498 persons) housing. This unusual housing mix makes Woodbourne a transition facility for persons who, after years of serving their sentences in maximum-security facilities, are reclassified to medium.<sup>1</sup>

As a result, Woodbourne tends to receive persons with characteristics unusual for medium security facilities. For example, 81% of persons serving their sentences in Woodbourne are convicted for violent offenses, while the system-wide percentage is 63%. In terms of age, prior record, time served, and time remaining, Woodbourne's population more closely resembles that of a maximum-security prison. Still, the facility ranks among the lowest in the state in terms of assaults on staff, violence amongst the incarcerated population, and other indicators of inappropriate behavior.

Woodbourne offers a range of programming including academic, vocational, transitional services, as well as industry and volunteer programs. Woodbourne continues to be one of the few facilities within the DOCCS system that operates the Bard Prison Initiative, a higher education program offering accredited undergraduate degrees.

#### **METHODOLOGY**

In order to assess accurately the services and conditions of the prison, the CA obtained surveys from 204 incarcerated persons about general prison conditions. To acquire survey

<sup>&</sup>lt;sup>1</sup> According to data furnished by the facility, in 2012, Woodbourne received 114 incarcerated persons from maximum-security prisons and 193 from medium-security.

participants, the Visiting Committee obtains informed consent from each individual that they would like to participate in this voluntary process, either on their housing unit or in their program area. The surveys are then mailed to each individual who provided us with identifying information. The CA ensures each participant that the information they provide is completely confidential and that the CA maintains "privileged mail status," permitting the Department to open the mail in order to search for contraband, but not to read the contents, as with regular mail.

This report is based on findings from data supplied by the facility and DOCCS prior to our visit; surveys filled out by persons currently incarcerated at Woodbourne; conversations with the superintendent, executive team, program staff, and persons incarcerated at Woodbourne; meetings with the staff union representatives and members of the Inmate Liaison Committee (ILC) and the Inmate Grievance Resolution Committee (IGRC). We appreciate the cooperation of the facility's administration during our visit and the extensive information staff provided to us during and after our visit. We would also like to thank all the persons confined at Woodbourne who participated in our survey.

In May 2013, we spoke with Superintendent Cunningham from Woodbourne and officials from DOCCS Central Office concerning a draft of this report detailing our preliminary findings and recommendations. We found the discussion informative and useful in finalizing this report, and have included information we learned during that conversation.

#### SUMMARY OF FINDINGS AND KEY RECOMMENDATIONS

During our visit to Woodbourne, the CA was pleased to find low levels of tension between staff and the population and that both individuals incarcerated at Woodbourne and the staff worked to create a relatively safe environment. Woodbourne consistently ranked towards the top of all CA-visited facilities for program satisfaction and perceived relations between staff and the people incarcerated there. The Visiting Committee was pleased to find that there were beneficial educational programs such as the Bard Prison Initiative and an expressed and demonstrated administrative commitment to education generally.

The CA was disappointed that a significant percentage of people incarcerated at Woodbourne were assigned to porter positions and that people serving long-term prison sentences were languishing with little to do or few, if any, options for programs. The overwhelming numbers of people being denied parole, especially in the context of a medium-security facility, is deeply concerning. In addition, a shortage of medical staff has resulted in limitations that potentially place an older population at risk.

Our principal recommendations to relevant state, DOCCS and prison officials include these measures:

- Make a sustained effort to provide meaningful programming for persons who have been incarcerated for long periods of time.
- Ensure that all rules and regulations regarding mail and packages are made clear to the prison population.

- Review mailroom policies to ensure that all staff members are operating under the same guidelines and interpreting the mail directive in a consistent manner.
- Review nursing procedures and best practices of care with all medical staff in order to eliminate inconsistencies in patient treatment provided during sick call encounters and protect confidentiality during examination room medical conversations.
- Consider reopening an infirmary in order to more adequately care for a mostly older patient population presenting unique challenges in terms of chronic illnesses and illnesses associated with aging.
- Address the limitations incurred by a shortage of physician and nursing staff, particularly given the older age of the prison population.
- In light of several grievances regarding the denial of HCV therapy and objections arising from the lack of access to new therapy, prison medical staff should carefully review all current patients to determine whether they will benefit from the new triple-drug therapy.
- Given the likelihood that Woodbourne may be undercounting its HIV-infected population, additional efforts must be made to encourage at-risk individuals to seek testing.
- Ensure relevant staff members are properly trained in new parole guidelines and that the risk-assessment tool (COMPAS) is being properly implemented and utilized.
- Ensure that all candidates for parole are given adequate pre-parole hearing time to fill out the risk assessment tool.
- Increase job opportunities for people incarcerated at Woodbourne so that individuals may learn additional skills besides the very limited skill set required for porter positions.
- Hire a Spanish-speaking teacher to ensure that incarcerated persons with limited English proficiency are afforded greater educational opportunities.
- Implement additional vocational programs and update the material and equipment available in the existing programs.
- Provide vocational materials in Spanish.

### PHYSICAL PLANT

According to one source, the design for Woodbourne was said to be adapted from the plan of a Spanish monastery, but there is no documentation to that effect to be found. To be sure, the sculptured wood and sandstone, along with the gothic-like arches, project an environment of monastic austerity. Imagery of crime and punishment are depicted on arched doorways, cathedral windows, and encircle pillars. Woodbourne's central courtyard echoes similar imagery: scales of justice, a book representing the law, and an hourglass symbolizing the passage of time. Ornamental architectural details such as varied brick patterns and masonry blocks, wrought iron chandeliers, steel cables for stairway handrails, decorative flourishes in wood and stone are found. Some members of the Correctional Association Visiting Committee noted an over-all solemn effect on the environment.

At the time of our visit, there was an ongoing kitchen renovation project that was taking longer than originally planned. During a post-visit interview, staff informed us that the project was completed in March 2013. A partial renovation of the showers was completed about three years prior to our visit. An electrical upgrade, that will allow for partial shutdown of power in the event of an outage or when a partial shutdown is needed for maintenance, is still currently under

way. In addition, work on the water filtration system was completed recently and heating pumps were in the process of being replaced. Overall, the facility seemed to be in good repair, and there were not many complaints from persons confined at Woodbourne with regard to infrastructure.

### DESCRIPTION OF GENERAL POPULATION AND CORRECTIONAL STAFF

As previously noted, Woodbourne had an incarcerated population of 824 persons at the time of our visit. According to information supplied by the facility, as of February 15, 2012, certain aspects of Woodbourne's demographic information differed from system-wide averages, in some instances significantly. Forty-eight percent of persons incarcerated at Woodbourne identified as African-American, 30% identified as Latino, and 20% identified as White; this differs from system-wide averages that report a slightly higher percentage of people identifying as African-American and White and a lower percent identifying as Latino.<sup>2</sup> The median age of incarcerated persons at Woodbourne is 44.5 years-old, which is significantly older than the system-wide median age of 37 years. Eighty-five percent of the people confined at Woodbourne are serving sentences for a violent felony, compared to the 63% system-wide, and a much lower percent of the population at Woodbourne are serving sentences for drug offenses compared to the system-wide data.<sup>3</sup> The median minimum sentence for individuals incarcerated at Woodbourne is 12.5 years, significantly higher than the system-wide average of 5.2 years and over half of the prison population was serving a minimum sentence of 10 years or more. Eventy percent of the prison population at Woodbourne had obtained a high school diploma, GED, or higher education degree, significantly higher than the system-wide average of 57%. Only 10% of the population has a 5<sup>th</sup> grade reading level or lower. Four percent of the population currently identifies as Spanish speaking with no, limited or moderate English proficiency.

Staff noted that they operate like a family at Woodbourne, and a significant number of Woodbourne staff has considerable correctional experience. Staff expressed concerns that without more pay increases, many staff at Woodbourne will retire, leaving a gap in experienced staff making it more difficult to run the prison effectively. At the time of our visit, Woodbourne was staffed by 270 corrections officers, and had no vacant positions. The facility had recently received 14 new security staff budget items, in addition to the transfer of 31 security staff following the closing of Mid-Orange and Arthur Kill Correctional Facilities. According to facility data, 12 members of security staff (4%) identify as African-American, six (2%) identify as Latino, none identified as Asian, and 17 security officers (6%) are female. Considering the overwhelmingly African American and Latino incarcerated population, the question remains how the stark differences in race and ethnicity impact relationships within Woodbourne.

<sup>&</sup>lt;sup>2</sup> Statewide 21.8% of people in prison identify as White, 50.8% identify as African-American, and 25.2% identify as Latino

<sup>&</sup>lt;sup>3</sup> Only 5% of the prison population at Woodbourne is serving time for a drug offense compared to the 15% of the population system-wide.

<sup>&</sup>lt;sup>4</sup> Two-hundred and fifty-nine persons or 31.4% of the population at Woodbourne was serving a minimum sentence of 10 years or more.

#### **SAFETY**

The Visiting Committee was pleased to learn individuals incarcerated at Woodbourne reported relatively low levels of physical or other abuse by staff and few conflicts among the men incarcerated there. Overall, survey responses ranked Woodbourne near the top of CA-visited facilities for least degree of tension between incarcerated persons and security staff. When asked, Woodbourne staff interviewed by the Visiting Committee attributed this to the facility's relatively older population and the significant number of people serving long-term or life sentences. Also mentioned as factors in safety were Woodbourne privileges such as access to kitchens, family reunion trailer visits, and its close proximity to New York City, that act as incentives for incarcerated persons to avoid behavior that could cause them to be transferred to a higher security or more problematic facility.

# Relations: Incarcerated Persons and Staff

Surveys from individuals incarcerated at Woodbourne indicated mostly positive views of their relations to staff. Survey participants estimated that a median of 60% of officers do a good job and 20% engage in serious misconduct. This is significantly better than other CA-visited facilities for which individuals estimate that 30% of officers do a good job and 50% engage in

serious misconduct. Twenty-nine percent of survey respondents rated security staff-prison population relations at Woodbourne as good and 44% rated relations between people incarcerated at Woodbourne and security staff as equally good and bad. This ranks Woodbourne

The officers look at the inmates as people at this facility not dogs like a lot of other facilities. -- Anonymous

within the top third of all CA-visited facilities for positive relations between staff and incarcerated persons. Twenty-eight percent of survey participants also perceived that relations between security staff and incarcerated persons were better at Woodbourne than at other facilities, and 24% felt that relations between incarcerated persons and staff were much better at Woodbourne than at other facilities.

We are pleased that the administration, line staff, and the people incarcerated at Woodbourne have worked to cultivate a relatively nonviolent and safe environment. However, there is the provision that people confined at Woodbourne have for the most part served longer sentences than the norm and may be comparing Woodbourne's security staff to staff at maximum-security facilities, and not just other mediums.

As indicated in **Table A** below, individuals incarcerated at Woodbourne report low levels of security staff misconduct, and Woodbourne consistently ranks in the top third of all CA-visited facilities for its low level of officer misconduct. Survey participants additionally report low levels of feeling unsafe with 51% of survey respondents reporting that they never feel unsafe, and 38.5% reporting that when they do feel unsafe it is only a little unsafe. Eighty-two percent of survey respondents reported that physical confrontations with staff never occurred, ranking Woodbourne sixth out of all CA-visited facilities for the least amount of physical confrontations between security staff and the people they are responsible for supervising. Twenty-nine percent of survey participants also reported that verbal harassment never occurred, ranking Woodbourne as third among CA-visited facilities for the least amount of verbal

harassment. When asked how common racial tension was at the facility, 36% of survey respondents reported that there was very little racial tension, ranking Woodbourne third among the 33 CA-visited facilities for the lowest level of racial tension between staff and persons serving their sentences. Table A: Survey Responses and Ranking in Regards to Physical Assault and Verbal Harassment at Woodbourne summarizes Woodbourne survey responses to questions pertaining to officer conduct.

Table A: Survey Responses and Ranking<sup>6</sup> in Regards to Physical Assault and Verbal Harassment at Woodbourne

How common is?	<b>Most Common</b>	Common	Not Common	Ranking
Physical Assault	5.8%	10.3%	84.4%	4
Verbal harassment	38.3%	39.4%	22.3%	4
Racial harassment	18.5%	28%	53.5%	8
Threats and Intimidation	26.7%	36.6%	36.6%	2
Abusive pat-frisks	12.1%	29.9%	58.8%	10
Turning off lights and water	6.5%	12.3%	81.2%	18
Retaliation	34.1%	40.1%	25.7%	15
False tickets	32.7%	34.5%	32.7%	7
<b>Destruction of Property</b>	12.5%	19.8%	67.5%	8

Woodbourne ranked fourth for medium-security prisons for the lowest rates of assault on staff for 2007-2011. Woodbourne reported 14 Unusual Incidents in 2011, none of which were for assault on staff. Moreover, the prison issued no disciplinary actions for assault on staff in 2011. In comparison, the system-wide average rate for incidents of assault-on-staff for medium-security prisons for the period of 2007-2011 was 3.75 per 1,000 individuals in the prison.

Twenty-three percent of Woodbourne survey respondents reported that administrative

There isn't much violence or drugs here and some officers look for the smallest things to harass inmates over. -- Anonymous staff did an effective job to prevent staff abuse and 24% reported that the administration did nothing at all. However, this means that nearly 76% of all survey respondents felt that the administration at Woodbourne took some measures to prevent staff abuse, placing Woodbourne second best of all CA-visited facilities to the

degree survey participants feel administrative staff takes measures to prevent staff abuse.

Despite the relatively positive ratings of relations between staff and incarcerated persons, a number of survey comments and interviews with both staff and incarcerated persons highlighted possible trends that raised some concerns. In particular, although Woodbourne rates favorably in terms of safety and violence, both staff and incarcerated persons described an environment in which that level of calm could potentially be maintained through the use of informants and surveillance, and a low threshold of tolerance for individuals who deviate from

<sup>5</sup> The CA measures frequency data on safety on a scale using the fields "Very Frequently," "Frequently," "Once in a While," "Once," in addition to "Never."

<sup>&</sup>lt;sup>6</sup> CA-visited facilities are ranked from best to worst, with one being the best and 33 being the worst.

<sup>&</sup>lt;sup>7</sup> Ranking based upon the rate of UIR assaults on staff during 2007 through 2011 for all medium security prisons.

the norm. While we are aware that such practices may be standard practice at correctional institutions, we have observed that an overreliance on such tactics may result in an environment that projects the illusion of calm, but is in actuality the result of an intimidated or cowed population.

Of related concern, some interviewed staff members used derogatory language when describing incarcerated persons, in the process betraying an overemphasis on safety and security at the expense of programs and rehabilitation. These attitudes and approaches are particularly concerning in the context of Woodbourne's older, more mature population who may possess higher levels of self-awareness, and who are nearing release to society. We commend Woodbourne for its relatively calm atmosphere, and we encourage the facility to explore ways to address negative behaviors or infractions that utilize positive reinforcement and strength-based approaches that promote behaviors leading to more effective coping mechanisms and increased morale for both staff and the incarcerated population.

#### Relations between Incarcerated Persons

People incarcerated at Woodbourne also reported low levels of conflicts with their peers. Only 3% of survey respondents reported that fights occurred frequently or very frequently at Woodbourne, compared to the average of 37% at all CA-visited facilities. Woodbourne ranks within the top third of CA-visited facilities for the lowest amount of reported altercations, and survey participants report significantly less altercations than the average at other CA-visited facilities.

Thirty-three percent of survey participants reported that gang activity was very rare and 18% reported there was none at all, ranking Woodbourne within the top 10% (second best) of facilities with the least amount of gang activity of CA-visited prisons. Forty-five percent of survey participants reported that drug use was very rare at Woodbourne, and 62% reported that drug use was not a source of violence at all in the facility, compared to a system-wide average of only 16% of prisoners who report drug use is rare and 33% who report drug use is not a source of violence at all, placing Woodbourne within the top ten (fifth best) of all CA-visited facilities.

According to DOCCS Unusual Incident Report (UIR) data, in 2011 there were two reported Unusual Incidents of assaults on incarcerated persons by their peers, and according to facility data, there were three peer-on-peer assaults by people incarcerated at the time of our visit in 2011. From 2007-2011, there were 12 reported UIRs of peer-on-peer assaults, resulting in a yearly result rate of 3.04 per 1000 incarcerated persons. Woodbourne ranks in the top third of all medium-security facilities for lower rates of assaults on incarcerated persons by their peers. <sup>8</sup>

According to survey participants, the stress of being in prison and personal conflicts were the biggest contributing factors to conflicts between people serving their sentences at Woodbourne. Woodbourne survey participants also reported that gang activity, drugs, gambling,

<sup>8</sup> Ranking is based upon rate of UIR assaults on inmate incidents during 2007 through 2011 for all medium security prisons.

and theft of property were often less common factors in altercations than most other CA-visited facilities.

Woodbourne ranks within the top 10% of all CA-visited facilities on several indicators for the least amount of altercations between people in prison and their peers and staff. We commend the staff at Woodbourne for fostering an environment devoid of extreme tension and altercations between staff and the men incarcerated there. We also commend the men incarcerated at Woodbourne for their part in collaborating to make a healthier environment and for serving as an example of how incarcerated persons can transform themselves and have a positive impact in their lives and the lives of others. We suggest, however, that Woodbourne administration, and ILC and IGRC members remain vigilant for any possible trends or correlations between incidents involving incarcerated persons and staff as well as peer-to-peer conflicts.

# **SPECIAL HOUSING UNIT**

Woodbourne operates a 14-bed capacity Special Housing Unit (SHU) for people serving a disciplinary sentence. At the time of our visit, the SHU was operating at its maximum capacity. As in SHUs across the state, people sent to isolated confinement at Woodbourne's SHU are locked in their cells 23 hours per day, with one hour a day for recreation, and are deprived opportunities for programming or any meaningful human interaction. Of particular concern during our visit, six out of the 14 people confined in the SHU at the time of our visit were on the mental health caseload. On another note, statements by medical staff indicating that people who commit serious acts of self-harm are sent to the SHU for one-on-one observation, raised concerns as it is an inappropriate location for persons experiencing mental health crises. In response to this concern, staff confirmed that persons experiencing mental health distress are sent to the SHU in the immediate term, but noted that DOCCS staff are always in consultation with OMH staff about the possibility of transferring such individuals, if needed, to the RCTP unit at Sullivan Correctional Facility where they are better equipped to address the needs of this population.

Also of potential concern, the number of people admitted to the SHU at Woodbourne increased over the three years prior to our visit, with 97 people in the SHU in 2009, 118 in 2010, and 147 in 2011. However, staff indicated that there had not been any increase in disciplinary action at the facility and instead attributed the increased use of the SHU to a new practice of sending all people from the dorms who are sentenced to keeplock time to the SHU. Staff indicated that the facility used to place people who were sentenced to keeplock in the C1 unit, but staff became concerned when incarcerated persons began referring to that block as the "jail company." This resulted in a change in policy that sent all people sentenced to Tier II keeplock time to the SHU.

During a follow-up conversation in May 2013, we were informed that due to policy changes, the SHU population had decreased to six with five serving SHU sentences and one in involuntary protective custody (IPC). This decrease in the number of people in the SHU seems to be due in part to the facility's reversal of its policy of placing people with keeplock time in the SHU, as persons sentenced to keeplock are now once again housed in general population in the

C1 and C2 housing blocks. Woodbourne staff also attributed the decrease to a review of SHU policies initiated by former DOCCS Commissioner Fisher with the aim of moving DOCCS away from a reliance on using SHU sentencing for lesser rules violations and focusing instead on individuals who commit more serious infractions. We were unable to ascertain if the latter consideration has had an effect on Woodbourne's SHU population, but the CA certainly encourages any measures that decrease the use of isolated confinement as a primary method to address problematic behavior.

#### INMATE GRIEVANCE PROGRAM

The grievance office at Woodbourne is staffed by one civilian supervisor and three incarcerated ("inmate") grievance representatives, as well as a clerk. Individuals who wish to file a grievance do so in their housing area and then mail or bring the grievance to the Inmate Grievance Program (IGP) office. Once the grievance is filed, a grievance clerk codes the grievance under the IGC supervisor and an investigation is completed by one of the Inmate Grievance Representatives. If the grievance is not a non-calendar contact, in which a complaint is informally resolved prior to the formal filing of a grievance, a hearing is scheduled within 14 days. If at that time the grievance is not resolved in a manner agreeable to the grievant, it is appealed to the superintendent for further action.<sup>9</sup>

Individuals incarcerated at Woodbourne filed 340 formal grievances in 2011, an 18% increase from the 289 filed in 2010. According to staff, an estimated one-third of all grievances are informally resolved. Medical was the highest area grieved in 2011, with 82 grievances filed, an increase of 46% from the 56 filed in 2010. The main areas of concern for individuals filing medical grievances were both referrals to outside specialists and access to care, as well as quality of care and treatment that was dismissive of or unresponsive to their presenting conditions.

The second highest grieved area at Woodbourne for 2011 was for staff conduct. There were 44 grievances filed concerning staff conduct, a 37% increase from the 32 filed in 2010. Staff interviewed by the Visiting Committee informed us that all 44 grievances regarding staff conduct were found to be unsubstantiated. Individuals who filed grievances in 2010 and 2011 regarding staff misconduct were most concerned by harassment, retaliation, threats, discrimination, intimidation, assault, and sexual assault by security staff. We strongly suggest that Woodbourne administrative staff and members of the ILC and IGRC investigate any trends in the increase in the number of grievances filed and adequately address the concerns of people incarcerated at Woodbourne.

Although incarcerated persons expressed some concerns about the effectiveness of the grievance system, as well as a perceived pressure to resolve grievances informally and a generalized fear of retaliation for filing a grievance, 39% percent of survey participants reported that the grievance system was somewhat effective and 42% reported it was very effective. This ranks Woodbourne first among CA-visited prisons for the effectiveness of its grievance system, within a system of prisons where the grievance system generally rate relatively poorly. While a

9

<sup>&</sup>lt;sup>9</sup> Exceptions to this procedure occur when grievances relating to institutional policy or staff misconduct are filed. In those cases, grievances are automatically sent to the superintendent.

few respondents expressed concerns regarding retaliation, 62% of survey participants at Woodbourne report that retaliation for filing grievances or submitting complaints is not common, situating Woodbourne in the top third of CA-visited facilities for how infrequently retaliation occurs.

### **PAROLE**

During our visit, parole was the major issue raised repeatedly by a broad range of incarcerated persons. Staff also expressed concerns regarding the recent merger of DOCS with Parole to form DOCCS, and were disturbed about the lack of consultation and direction with the merger.

Survey participants' concerns about widespread and arbitrary denials by the Parole Board, particularly those based almost exclusively on the nature of an individual's crime for people convicted of a violent felony, and inadequate due process in parole hearings mirror system-wide issues in need of immediate attention. Furthermore, the parole processes seemed particularly problematic at Woodbourne and had a disproportionately negative effect on the people incarcerated there. Specifically, a significant number of Woodbourne residents have been denied parole repeatedly, up to 5 or 10 times, <sup>10</sup> and because they have satisfied their vocational and educational requirements and there are few additional programs available to them, they live in what was described as a "state of limbo." Many of these denials are based almost entirely on the nature of the candidate's original crime, rather than his institutional record, demonstrated personal growth, accomplishments while in prison, or readiness for reentry. Consequently, numerous Woodbourne residents who have done everything possible to rehabilitate themselves while in prison can do very little to increase their chances of obtaining parole. As one survey respondent noted:

I am an example that despite doing everything required and going above and beyond what is asked of me, I'm still denied parole. Despite recommendations of DOCS staff that deal personally with me on a daily basis, I am denied release on parole due to my instant offense and criminal history. I've been referred to as a model candidate for parole release by DOCS staff but parole does not care. Because of this reality, men are discouraged feeling that no matter what improvements they've made in their lives, parole will never recognize it above the things they cannot change (such as their past) enough to warrant release back to society.

Further concerns and issues raised regarding parole by people incarcerated at Woodbourne included the sense that hearings were unnecessarily rushed, making it extremely difficult in instances where over 20 year's worth of information had to be taken into consideration. Many people also complained about counselors not working closely enough with parole applicants and the lack of assistance in preparing for parole.

<sup>10</sup> From April, 2010 to March, 2011, 63% of all of Woodbourne's parole hearings (including for regular parole hearings, parole violator and conditional release hearings, and merit time hearings) resulted in a denial while the average rate of denial at all maximum-security prisons for the same time period was 53%.

Incarcerated persons noted that the proceedings were not adequately recorded or documented. More concerning, the risk assessment tool was reportedly being completed without adequate input from the persons being evaluated and sometimes contained incorrect information. Consequently, personal questions regarding individuals, such as family support (an important factor in parole decisions) were incorrect. In addition, perhaps due to the merger being in its early transitional phase, survey participants and interviewed people observed a confusion regarding how persons could address concerns about parole issues and proceedings.

The facility noted that some of these issues might have been the result of a transitional period caused by the merger of DOCS and parole and a learning curve necessitated by the implementation of a new risk assessment tool. In a follow-up interview, Woodbourne staff expressed a desire to have assessments given to applicants much earlier and that some measures to rectify this problem have been taken and as a result, the average time a parole candidate receives his assessment is five days before his hearing.

In conclusion, high rates of parole denials combined with a lack of vocational, educational, and programmatic opportunities for the mostly older population at Woodbourne has the unintended effect of punishing individuals who, due to their good institutional record, have been reclassified to a medium-security facility where lack of programs leaves many persons serving long-term sentences without hope or motivation to continue to grow and change.

# **PROGRAMS**

The Visiting Committee toured Woodbourne's academic, vocational, and transitional services programs. According to information provided by the facility, 94% of the persons currently incarcerated at Woodbourne were programmed full-time, with at least two modules per day from a combination of morning, afternoon, and evening modules. Four percent of the prison population was idle. However, of the 619 individuals assigned to facility jobs in the morning (AM) module, 165, or 36% were assigned to porter positions, where cleaning and maintenance tasks are emphasized and typically do not teach productive skills that help people obtain jobs once they are released from prison. Similarly, of the 656 individuals assigned to facility jobs in the afternoon module, 201, or 30%, had porter jobs, and 99, or 53%, of 186 facility jobs in the evening module were porter jobs.

The facility's one industry program, asbestos abatement, which has a capacity for six, was operating with only four participants. Woodbourne ranked near the top of all CA-visited facilities for job satisfaction with 79% of survey participants reporting satisfaction with their job at least "sometimes." Survey comments revealed that some people incarcerated at Woodbourne enjoyed the work they were engaged in and the skills they were learning. However, there were a number of comments complaining about low-wages and the large number of porter positions that did not provide them with adequate or marketable skills upon release. While these high rates of satisfaction contrasted with complaints of an anecdotal nature may appear contradictory at first, rates of satisfaction also are an expression of generalized attitudes and the effects of

<sup>&</sup>lt;sup>11</sup> Compared to 71% of survey respondents at all CA-visited facilities for job satisfaction.

institutionalization endemic to long-term sentences. In addition, these rates have to be taken in the context of a correctional system that rarely offers higher-level functioning jobs and programs.

#### Academic Programs

For the most part, people incarcerated at Woodbourne highly regard its educational programs, with 90% of survey participants rating them at least fair<sup>12</sup> and many respondents commenting that the classes are operated efficiently and administered well by staff and teachers' aides. However, there seems to be an overarching concern about the books and computers being either outdated or not easily accessible. A major concern was the limited access to the Bard Prison Initiative (a prison-based college program discussed in more detail below) because of the limited number of students able to enroll.

Woodbourne offers four educational programs: one Adult Basic Education (ABE) class, two Pre-GED classes, one ESL, and one GED class. Woodbourne also offers a Multi-Level course during the evenings, which is available to persons who are programmed during the

The educational program in this facility is the best I seen so far.
-- Anonymous

day. At the time of our visit, there were also 72 incarcerated persons participating in the Bard College Initiative associates degree program, nine enrolled in a post-secondary accreditation correspondence course, and 15 enrolled in one year of post-secondary courses through the Rising Hope program.<sup>13</sup>

The classrooms the Visiting Committee toured had plenty of light and were clean, and the walls were decorated with informational posters. At the time of our visit, Woodbourne employed four full-time teachers, and each class was also staffed by Inmate Program Assistants (IPAs). Woodbourne does not have a bilingual teacher in their Second Language (ESL) program, and a number of persons the Visiting Committee interviewed reported that this posed a difficulty to individuals who were Spanish-dominant and for those hoping to take the Spanish GED.

During our visit, staff informed the Visiting Committee that they believe in an English immersion only approach to ESL, stating that the "research shows" this modality is the most effective. This assertion seems to be misinformed, as the empirical literature shows the *opposite* may be true. <sup>14</sup> Researchers assessing programs over the last quarter century found strong evidence that the educational success of ESLs is positively related to sustained instruction through the student's native language. <sup>15</sup> In addition, teaching strategies for adult Spanish-English bilingual education programs exist on a continuum, determined by the learning needs of the students in relation to English skills on the one hand and knowledge of cultural heritage on the

<sup>12</sup> Sixty-eight percent of the respondents rated Woodbourne's educational programs as good and 22% rated them as fair.

<sup>&</sup>lt;sup>13</sup> Rising Hope at Woodbourne does not offer accredited college credits. However, Nyack College has an agreement that allows Rising Hope participants to transfer credits there.

<sup>&</sup>lt;sup>14</sup> Collier, V.P., & Thomas, W.P. (2004). The astounding effectiveness of dual-language education for all. NABE Journal of Research and Practice, 2(1), 1-20.

<sup>&</sup>lt;sup>15</sup> Genesee, F., Lindholm-Leary, K., Saunders, W., & Christian, D. (2005). English language learners in U.S. schools: An overview of research findings. *Journal of Education for Students Placed At Risk*, 10(4), 363-385.

other. In other words, the acquisition of English language skills is best facilitated by the development of life skills taught in a dual-language, culturally sensitive learning environment, in which teacher-student relationships evolves in an atmosphere that is both friendly as well as dynamic. Taken together, these findings indicate that English language learners are more successful when they participate in programs that are specially designed to meet their needs (cultural, linguistic, etc.) than in mainstream English-immersion classrooms. **Table B:**Woodbourne's Educational Program Capacity, Enrollment and Waiting List summarizes Woodbourne survey responses to questions pertaining to educational programs.

Table B: Woodbourne's Educational Program Capacity, Enrollment and Waiting List

	Capacity	Enrollment	Waiting List	<b>Total Enrolled + Waiting List</b>
ABE	40	40	42	82
Pre-GED	60	60	23	83
GED	20	20	9	29
ESL	20	20	9	29
SNU	30	30	0	30
Bard College	11	72	0	72
Correspondence		9	0	9
Total	170	251	83	334

According to data provided by the facility, 71% of the persons incarcerated at Woodbourne have their high school diploma or GED, higher than the system-wide average of 57%. According to the facility, of the 11, 21, and 12 participants who took the GED exam in 2009, 2010 and 2011, three passed in 2009, 17 passed in 2010, and 12 passed in 2011, respectively. With such a large percentage of people already with their GED and limited college programs, offering additional educational opportunities is extremely important and provides the people incarcerated at Woodbourne with important incentives and opportunities. The CA is pleased that the Woodbourne administration is providing some opportunities and is exploring ways of increasing such opportunities for the prison population.

#### **Bard Prison Initiative**

The Bard Prison Initiative (BPI) is the largest program of its kind in the United States and advocates for the restoration of college-in-prison programs nationally. Recently, BPI has created a consortium that seeks to establish such programs in ten states in five years. As of 2010,

Bard is a liberal arts program that teaches one how to think, reason, and write. -- Anonymous

Wesleyan University in Connecticut and Grinnell College in Iowa had become consortium members. Currently enrolling 250 incarcerated men and women at several New York state prisons<sup>16</sup> and offering a broad range of academic disciplines, and over 50 courses each

semester, BPI has, since its initiation in 2005 through the close of 2011, granted 157 degrees and enrolled a total of nearly 500 students.

<sup>&</sup>lt;sup>16</sup> In addition to Woodbourne, BPI is offered at Elmira, Eastern, Green Haven, and Bayview.

All BPI students who fulfill course requirements can work toward an Associate's or Bachelor of Arts degree from Bard College. Currently, Woodbourne's BPI program offers only associate-level degrees. The courses are taught primarily by Bard College faculty, as well as visiting professors from regional colleges and universities, including local community colleges, Columbia University, and New York University. BPI faculty are compensated by Bard for their teaching, and the program is funded exclusively by private donations, without DOCCS or state assistance. Volunteers also come in to help tutor enrolled students. Bard classes meet five days a week, with as many as three classes a day. Students study a variety of subjects, including Political Science, Advanced Math, History, and Community History. There is also a "College Lab," where computers are designated exclusively for Bard student use.

At the time of our visit, there were 72 (16 beginning their first semester) incarcerated persons enrolled in BPI at Woodbourne. People incarcerated at Woodbourne are able to apply every two years. Staff indicated that 70 to 80 people apply each time, and only 15 students are selected. As previously noted, one of Woodbourne's distinguishing factors is the high percentage of persons with a GED (71% compared to 57% system-wide). During our visit and in responses to our surveys, many people incarcerated at Woodbourne expressed satisfaction and interest in BPI. Ninety percent of survey responses rated BPI as at least fair (78% rated it as good). However, these sentiments were tempered by expressed frustrations of not being able to enroll in BPI. Systemically, there are ten applicants for each slot. This means that a large number of people incarcerated at Woodbourne, many of whom enthusiastically embrace such opportunities and would potentially benefit from more college opportunities, are instead spending time languishing in prison.

The Bard Prison Initiative and similar college education prison initiatives offer a glimpse at a tremendous potential that has largely gone untapped at DOCCS since the 1990s. Research

clearly shows a positive correlation between correctional postsecondary education programs and reduced rates of recidivism. In addition, programs such as BPI have been shown to reduce rates of violence during incarceration, having the added effect of both benefitting those who are incarcerated as well as prison staff.

I love the educational experience because it allows me to make lemonade out of lemons. -- Anonymous

For example, Bard has extended college opportunity to correctional facility staff with a scholarship program that will provide full tuition (and room and board) to Bard College for two children of New York State Department of Correctional Services employees each year. Finally, in an era of tight budgets, DOCCS programs are being closely scrutinized to determine whether program (and prison) costs justify the results. Studies show that funding correctional

program (and prison) costs justify the results. Studies show that funding correctional postsecondary education programs are beneficial because they reduce recidivism dramatically,

<sup>&</sup>lt;sup>17</sup> While Woodbourne's BPI program currently offers only an Associate's Degree, graduates are offered the opportunity to attend a BPI program offering a Bachelor's degree at another state facility.

<sup>&</sup>lt;sup>18</sup> Esperian, J. H. (2010). Effect of prison education programs on recidivism. Journal of Correctional Education, 61(4), 316-334.

reduce costs associated with long-term warehousing, and serve to make safer prison environments.<sup>19</sup>

Sixty-nine percent of survey participants reported as being at least somewhat satisfied with their academic programming at Woodbourne. This level of satisfaction is significantly higher than the 59% average at CA-visited facilities. Survey participants who commented on educational programs noted that they would like to see increased post-secondary educational programming and that the classes would be better served if teachers were more engaged in the duties of hands-on teaching.

# **Vocational Programs**

Woodbourne operated five vocational programs at the time of our visit and one industry program. The facility provided data indicating the employment of five full-time vocational instructors, none of whom are fluent in Spanish. At the time of our visit, the facility also listed two vocational instructor vacancies. One of these positions had remained vacant for over three years, while the other had been vacant for over a year. The CA toured all vocational programs. With the exception of the Radio and Television Repair workshop (which has since been replaced by new Custodial/ Maintenance program), the CA observed relatively up-to-date equipment in use in the workshops. **Table C: Woodbourne's Vocational and Industrial Program Capacity, Enrollment and Waiting List** below summarizes the program capacity, enrollment, and waitlist for each vocational and industry program at Woodbourne.

Table C: Woodbourne's Vocational and Industrial Program Capacity, Enrollment and Waiting List

	Capacity	Enrollment	Waiting List	Total Enrolled +
				Waiting List
Vocational Programs				
Air Cond., Refrig. & Heating	38	37	7	44
Printing	34	29	3	32
Radio and Television Repair*	34	29	3	32
Welding	26	26	3	29
Food Service	22	17	1	18
Custodial/ Maintenance**	N/A	N/A	N/A	N/A
Industry Program				
Asbestos Abatement	6	4		4
Total	159	138	17	159

<sup>\*</sup> Was closed on June 20, 2012

<sup>19</sup> Winterfield, L., Coggeshall, M., Burke-Storer, M., Correa, V., & Tidd, S. (2009). *The effects of postsecondary correctional education: Final report.* Washington, DC: Urban Institute.

<sup>\*\*</sup> Opened on March 4, 2013

The difference between total capacity and enrollment in vocational programs, as well as the existence of a waitlist, strongly suggests the facility may want to review the mechanisms in

The current vocational programs that I have seen in this prison really are not applicable in the outside world once an inmate is released. -- Anonymous

place for determining openings (e.g. openings due to a transfer or held for disciplinary reasons) and look for ways to increase enrollment. Additionally, as a potential avenue to increase total capacity, the development of new programs would be beneficial. Over the last two years, two programs, custodial maintenance and electoral trades, have closed, but at

the time of our visit, no replacement programs have been added. As a result, even with programs filled to capacity, only 20% of the population has the opportunity to participate in Woodbourne's vocational programs. This leaves four out of five incarcerated persons not engaged in meaningful vocational training.

Fifty-eight percent of survey participants reported that they were at least somewhat satisfied with their vocational program, compared to the 64% average at all CA-visited facilities. In contrast, 66% of survey participants reported they were not enrolled in a vocational program and less than one percent of survey respondents were on the wait list for a vocational program. However, the latter number may be somewhat deceptive: Due to Woodbourne's longer than average median sentence, many people incarcerated at Woodbourne may have previously satisfied their vocational mandates before coming to the facility, which may account for the low percentage on the waitlist. This is an important distinction because it highlights the need for programs that address the unique challenges Woodbourne's older population presents.

In addition to ensuring existing programs are maximized (or expanded), as well as developing programs to allow for additional participation, programs should be evaluated in terms of their relevance to workforce demands outside of prison. The Visiting Committee toured all the vocational programs and was pleased to find instructors emphasizing both theoretical and handson skills in their respective classes. However, individuals incarcerated at Woodbourne often spoke of a need for a wider variety of programs in conjunction with updated technology in order to provide training and skills applicable to current demands for the workforce outside prison walls.

The concern regarding obsolete equipment and the teaching of relevant job skills was expressed often, both during our visit and by a significant number of survey respondents. For

example, during our tour of the vocational programs, one participant in the Radio and Television Repair program pointed out that students were being taught on analog devices — a technology essentially obsolete outside of prison. Instead, a number of survey participants suggested perhaps updating the technology and offering courses related to computer skills.

They have you repairing old TVs and radios that are not being used on the street. They are not teaching us the new stuff. -- Anonymous

Also demonstrating the lack of vocational programs providing marketable skills, at the time of our visit, Woodbourne was not offering NCCER certificates and the number of Department of Labor (DOL) certificates granted (in welding, printing, and food service) for the

years, 2009, 2010, and 2011 were two, one, and one, respectively. This is particularly concerning, especially when considering we are looking at a population that is for the most part facing long-term confinement and that will be returning to their respective communities facing major obstacles to employment.

### Volunteer and Recreational Programs

According to facility data, 62% of the population, or 516 of the people incarcerated at Woodbourne, were involved in volunteer programs at the time of our visit. Woodbourne offers an array of volunteer programs which range from 12-step fellowship meetings (AA/NA) to faith-based study groups.

Woodbourne has two different yard areas that persons can use for recreation. One of the yard areas has a volleyball net, a basketball court, and a fairly large open space. The other yard has a ball field on which sports are played that is open only from April through November.

The facility also has a flower garden and a vegetable garden where food is grown. Most of the food grown there goes to local people who are homeless, but incarcerated persons are allowed to keep some for their own consumption if they have grown it.

### **SPECIAL PROGRAMS**

# Special Needs Unit

Special Needs Units (SNUs) are intended to be therapeutic communities that provide long-term habilitative services to incarcerated persons who have been identified as developmentally disabled or who have significant intellectual and adaptive behavior deficits. Persons incarcerated in a SNU generally have a WAIS IQ<sup>20</sup> of 70 or below and adaptive deficits.

At the time of our visit, the participants in SNU that we met exhibited vast disparities in their cognitive abilities, ranging from those who appeared highly functional to those with

We need more programs and counselors. -- Anonymous

significant learning disabilities. According to DOCCS, the ultimate goal of the program is to provide skills which allow incarcerated persons to be mainstreamed to general population and enable them to benefit from

regular facility programming. Upon the closing of Arthur Kill Correctional Facility, Woodbourne inherited its SNU program. With a 50-bed capacity program currently operating at full capacity, Woodbourne's SNU began operation in October, 2011.

<sup>&</sup>lt;sup>20</sup> The Wechsler Adult Intelligence Scale (WAIS) is a test designed to measure intelligence in adults and older adolescents. It is currently in its fourth edition (*WAIS-IV*). See: Hardyman, P. L., Austin, J., & Peyton, J. (2004). Prisoner intake systems: Assessing needs and classifying prisoners. Washington, DC: National Institute of Corrections.

The procedure for referring an individual is that a facility staff who is recommending a person incarcerated at Woodbourne for consideration for SNU admission completes a SNU referral form and forwarded to the DOCCS Bureau of Mental Health.

Participants within the SNU suggested several programs should be made available, and judging how this SNU operated before being moved from Arthur Kill to Woodbourne at the very least, a one-hour daily life-skills program and a one and a half hour, nine-month ASAT program should be implemented. Interviews conducted with people incarcerated on the unit generally uncovered concern and dissatisfaction with the lack of programming, particularly with education. At the time of our visit, incarcerated persons stated that there was in fact little programming other than ASAT in the SNU unit, leaving some people idle for much of the day. Some incarcerated persons indicated that prior to transfer from Arthur Kill, they were promised that there would be vocational and other programs at Woodbourne as there had been at Arthur Kill, but at the time of our visit, they were not satisfied with the level of programming at the facility. Furthermore, the introduction of the SNU had adversely impacted Woodbourne's educational resources by placing additional demands on an educational staff already stretched to their capacity meeting the needs of the existing prison population.

Additionally problematic, the SNU is housed in what was formerly a gymnasium and some members of the Visiting Committee reported that the open space and high ceilings created reverberations adding to a disorienting and noisy environment. Also concerning, some interviewed individuals stated that they did not feel as safe at Woodbourne's SNU, particularly in comparison to their facilities at Arthur Kill

Due in large part to the fact that while the SNU population was transferred to Woodbourne, most of its staff was not, the SNU was experiencing difficulties at the time of our visit. During our visit, staff indicated that the facility had just received budget approval for staff and was in the process of staffing the unit. Ultimately, the unit should have six full time staff, including one supervising counselor, one general counselor, one social worker, one computer keyboard specialist, one recreation program leader (RPL), and one teaching assistant. At the time of our visit, the facility had only two staff: one social worker and one teaching assistant. That has since changed, and we are happy to report that the SNU is now operating with one Supervisor Offender Rehabilitation Counselor (SORC), an Offender Rehabilitation Counselor (ORC), a Recreation Program Leader, a Keyboard Specialist, and a Teacher's Assistant. Unfortunately, the social worker has since left due to a promotion, but Woodbourne is in the process of filling that vacancy. In addition to increased activities and programs, SNU participants are now being offered life skills training and ASAT.

# Hearing and/ or Visually Challenged Incarcerated Persons

Woodbourne incarcerates 59 persons who are either visually or hearing impaired and mainstreamed into the general population. Visually impaired persons have sighted guides that assist them with movement between programs and living quarters. At the time of our visit, there were 51 sight-guides. Some visually impaired persons complained that there was a mixed housing unit for sensorially challenged persons, including the sight-guides, and expressed preference for a unit exclusively for visually impaired persons.

The Visiting Committee toured the facility's resource room for the visually and hearing impaired and met with the staff person who was hired in October 2011 as a sensory specialist. The resource room offers magnification equipment to help the visually impaired. In addition, the resource room offers text-to-voice software that converts written word into audible language. The staff member with whom we met implemented a sign language certification program at Woodbourne, and one person had been certified between October 2011 and February 2012.

The resource room has computer equipment available for sensory-challenged persons. At the time of our visit, some visually challenged persons complained that access to computers is limited to morning modules, resulting in limited access to a computer. Others complained that there are no classrooms for the visually challenged, and there is no specific instruction for people who are blind, such as training on how to read Braille or use a cane properly, skills that will be necessary upon release. Furthermore, some persons complained about the small size of the TV in the housing area, making it very difficult for visually challenged individuals to watch, unlike the facilities at Eastern C.F. where, we were informed, the housing area for visually challenged persons had a larger TV appropriate for people with this disability.

However, we are happy to report that since our visit, Woodbourne has begun offering programs for the sensorial challenged in its resource room. Sign language videos, IPA-facilitated ABE and GED tutoring, facilitated Braille classes, and basic computer classes are among the programs offered. We commend the facility for creating opportunities for enrichment for this population.

# Sex Offender Program

Though it was not yet operational at the time of our visit, staff informed us that as a result of the closure of other prisons, Woodbourne will be operating a 50 participant non-residential modular sex offender program (SOP). Administrative staff indicated that the facility had received approval to hire staff for the SOP, particularly two counselors and one social worker. Staff anticipated that the program would start around April 2012. In February 2013, an SOP with a capacity for 12 participants opened and is currently operating and staffed with two Offender Rehabilitation Counselors (ORCS); the facility also has budget approval to hire a social worker for the program.

## TRANSITIONAL SERVICES PROGRAM

At the time of our visit, Woodbourne operated all transitional services (TS) programs, including Phase I, Thinking for Change (T4C), Phase III, and ART. The TS program employs one full-time counselor that worked in Phases I, T4C and III, and a second full time counselor in the ART program. At the time of our visit, the TS office had the appearance of a classroom, with several posters explaining how TS programs work, inspirational posters and quotations, a cork board with job and education resources posted, and signs with resources by geographic region.

Table D: Woodbourne's Transitional Services, Capacity, Enrollment and Waiting List summarizes the capacity, enrollment and waitlist for each TS program.

Table D:	Woodbourne's	<b>Transitional</b>	Services.	Canacity,	<b>Enrollment</b>	and Waiting List
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	Capacity	Enrollment	Waitlist	Completed 2009	Completed 2010	Completed 2011
Phase I	24	as needed	7	307	151	404
T4C	12	12	499	102	72	74
Phase III	15	20	635	48	84	50
ART	20	20	111	100	58	20

Phase I is a general introduction/ orientation to DOCCS policies, life in prison, and facility specific protocols. Woodbourne's Phase I is normally in session for five days and is facilitated by IPAs, though with assistance from the civilian counselor. A three-day non-Phase I orientation also takes place at Woodbourne, during which staff from different parts of the prison explain the various aspects of life at Woodbourne to new arrivals.

Thinking for Change (T4C) replaced DOCCS Phase II program and has been in operation at Woodbourne for three years prior to our visit. T4C meets on Monday, Wednesday, and Friday mornings at Woodbourne for 9-10 weeks.T4C is completely staff-run at Woodbourne and utilizes a cognitive behavioral (CBT) approach. As shown in **Table D**, there is a large waitlist for T4C, and only a small number enrolled, resulting in people having to wait a long time before being able to take the class. Staff informed us that the TS counselor runs most T4C courses, but civilian staff counselors from other parts of the prison will sometimes act as substitutes and run courses for specialized caseloads.

In 2011, staff estimated that 8 or 9 T4C sessions were completed, in part because of the assistance of other counselors. At the time of our visit, only the TS counselor had run T4C courses thus far in 2012. Staff lamented that DOCCS had phased out the awarding of certificates of completion for those who successfully participate in T4C, and noted that because of their potential importance for the Parole Board, the TS counselor gives a copy of participant evaluations to each participant. Of the survey respondents that had participated in T4C, 57% expressed satisfaction with the program, compared to an average of 42% at all facilities for which the CA has comparable data, ranking Woodbourne as one of the best CA-visited facilities for which we have T4C data.

Phase III is a four-week program that attempts to address some of the barriers formerly

Getting into Phase II or Phase III is next to impossible. -- Anonymous

incarcerated persons often face upon their release back to their communities. Again, as seen in **Table D**, there are huge waitlists for Phase III, and only a small number were enrolled, leading many people to be

delayed in participating in the program. According to staff, two IPAs run Phase III for the most part, although the assigned TS Counselor also runs portions of the program.

The TS counselor facilitates all of the lessons in the Family Reintegration module of Phase III and for all other modules, the counselor facilitates only one out of the 12 lessons in each module. Although part of Phase III is to help people prepare a resume, many people at Woodbourne have already completed a resume prior to participation in Phase III. Staff estimated

that out of a class of 15, three participants will be interested in help with a resume, for which there are typewriters but no computers available.

TS staff and IPAs also assist participants in obtaining important documentation such as Birth Certificates and Social Security Cards. In 2009, 2010, and 2011, 12, 15, and 21 Social Security Cards were obtained, respectively; and in 2009, 2010, and 2011, 66, 78, and 18 Birth Certificates were obtained, respectively. Twenty-eight percent of survey participants had been in Phase III and 75% were at least somewhat satisfied with the program, a significantly higher satisfaction rate than the 51% average at all CA-visited facilities, ranking Woodbourne as one of the best CA-visited facilities for which we have comparable data.

Aggression Replacement Therapy (ART) is a seven-week peer-run program. Twenty-four percent of survey respondents reported having participated in the ART program at Woodbourne. Eighty-six percent of those who had participated in ART were at least somewhat satisfied with the program. This is significantly higher than the 65% average of at all facilities for which the CA has comparable data, and ranks Woodbourne in the top 15% of CA-visited prisons.

Many survey respondents recognized the severe staffing and resource limitations of the TS office and the resulting effect on the TS programs as they struggle to provide meaningful assistance for people preparing to transition back to their communities. Consistent with the long waitlists previously noted, a number of survey responses expressed frustration with lengthy waits for enrollment, in some cases resulted in anxiety over the possibility of a negative impact on parole decisions.

In addition, large numbers of survey respondents consistently noted that resources for jobs, housing, and programs in the community identified by TS staff were often outdated and limited. Several respondents expressed concerns about the absence of computers that could be used to search for resources or to create and save resumes in the TS office. Other survey respondents noted that there should be more information specific to the requirements of people with particular needs. For example, individuals convicted of sex offenses, facing deportation upon release, and people returning to communities other than New York City, present needs that are often not adequately addressed.

In a related manner, several survey respondents expressed concern that incarcerated persons helping facilitate the TS programs are themselves limited in their knowledge of opportunities outside of prisons and that the programs do not have stronger ties to stakeholders from communities with such knowledge. While the Correctional Association realizes this problem in not limited to Woodbourne, this challenge presents the facility with the opportunity to better train peer educators, and in the process help individuals about to return to their communities in a more efficacious manner. In addition, this could present a window of opportunity for Woodbourne to enlist the help of outside community-based organizations in order to connect to vital reentry services.

### **MEDICAL CARE**

During our prison visit, we met with staff from the medical department at the prison and toured the medical area. We also received extensive information both prior to and after the visit about the healthcare operations. We appreciate the cooperation of the prison staff in providing this information and explaining the health services at the facility.

Woodbourne survey participants had mixed reviews of the medical care provided to them at the prison, with half rating overall medical care as fair, about one-third rating medical care as poor and 13% stating it is good. Overall this places Woodbourne in the top third of CA-visited prisons for patient assessment of their treatment. **Table E- Summary of Woodbourne Survey Participants' Response about Prison Medical Care** summarizes the data on several aspects of the medical care system, along with the prison ranking for each indicator.

Table E- Summary of Woodbourne Survey Participants' Response about Medical Care

= ====================================			T the designation of the point					
Medical Service	Yes	Sometimes	No	Rank	Good	Fair	Poor	Rank*
Can you see an RN when needed	72.8%	18.3%	8.9%	3				
Rate Nursing care					13.3%	42.5%	44.2%	16
Do you experience delays in seeing a clinic provider *	28.9%	46.2%	25.0%	15				
Rate Physician care					18%	41.6%	40.4%	11
Experience delays in specialty care	45.2%	14%	40.9%	16				
Good follow-up to specialists	41.8%		58.2%	13				
Problems getting medication	20.1%	21.5%	58.3%	8				
Rate Overall Healthcare					13.3%	51.1%	35.6%	10

CA-visited facilities are ranked from 1-33, one being the best and 33 being the worst.

# **Medical Staffing**

At the time of our visit, Woodbourne's medical operation was staffed by a nurse administrator, one full-time physician and one half-time physician, seven full-time equivalent (FTE) permanent nurses, and two FTE per diem nurses. In addition, a physician's assistant (PA) worked extra service at the prison 10 to 15 hours per week seeing patients in the clinic. During our follow-up phone call with the facility in May 2013, we learned that the half-time physician position was replaced with a full time nurse practitioner. At the time of our visit, 2.5 FTE nursing items were vacant, two of which had been unfilled for eight months, and the facility was still not authorized to fill these vacant items. Since our visit, however, one half-time nursing item was filled, bringing down the vacant FTE nursing items to two. In order to operate the medical unit, the prison was regularly using overtime for permanent staff and the per diem items. The ratio of nurses to patients was one for every 90 patients, a figure somewhat worse than at many other

<sup>\*</sup> The three categories for this variable are: Yes=Frequently; Sometimes=Once or once in a while; and No=Never.

facilities. The ratio for physician staff at the time of our visit was one doctor for every 550 patients, which is much worse than the system-wide average of 1:400. Although there was a PA temporarily working at the prison, even with this addition, the clinic staff to patient ratio was still one provider for every 450 patients. We are concerned about the limited physician and nursing staff, particularly given the older age of the prison population. We are pleased that at least Woodbourne was able to replace a half-time clinical provider with a full-time nurse practitioner, bringing the patient to clinic staff ratio closer to the system-wide average.

#### **Medical Facilities**

We toured the medical area, which consisted of two examination rooms for the clinic providers, a treatment room, and an additional room that is sometimes used for examining patients. There is an issue about the ability to keep conversations private in the examination rooms as some medical staff keep the exam door open during medical encounters, which can allow security staff in the area to hear conversations occurring in these rooms.

The prison does not have an infirmary for patients requiring 24-hour nursing care and therefore, individuals needing these services must be transferred to Sullivan C.F. The staff estimated that five to 10 patients are sent to Sullivan each month for infirmary care. Staff informed us that on average about one person per week is sent to Sullivan for inpatient care. Persons returning from an outside hospital also go to the infirmary at Sullivan before returning to Woodbourne. Given the large number of older patients and individuals with chronic illnesses, we are concerned about the prison's lack of an infirmary, specifically, whether there is prompt intervention when a patient needs infirmary care and whether the prison can maintain adequate continuity of care for individuals sent to Sullivan for care. Woodbourne medical staff noted that the physician's assistant (PA) currently performing extra services at Woodbourne is assigned to Sullivan and suggested that this provider can facilitate the coordination of care for these patients. We remain concerned about this situation, however, as this is only a temporary assignment for the Sullivan PA and should not be the mechanism to ensure continuity of care. We urge the prison to consider reopening the infirmary for its patient population.

#### Sick Call

Sick call is conducted four days per week on Monday, Tuesday, Thursday and Friday starting at 6:00 am until 10:00 am. Medical staff estimated that 355 patients are seen each month for regular sick call and about 65 patients are seen monthly for emergency sick call. Medical staff informed the CA visiting committee that they rarely issue tickets for abuse of emergency sick call.

The average nurse treats the patient more like a convict than a patient. -- Anonymous

As indicated in **Table C** above, 73% of survey respondents reported that they could access sick call when they needed, which ranks Woodbourne near the top of all CA-visited facilities for access to care. However, survey participants had mixed reviews of the

quality of the encounters with sick-call nurses with 44% reporting that they were poor and 43% reporting that they were fair; this places Woodbourne at about average for all CA-visited prisons. Although some survey participants thought some sick call nurses did a good job and cared about

the patients they were treating, many respondents said some sick call nurses exhibited a negative and uncaring attitude towards their patients. One sick call nurse was repeatedly cited as rude and disrespectful to her patients. Due to the reported inconsistencies in the service patients are receiving, we suggest that the facility review best practices of care with all medical staff to ensure that all patients are receiving the very best of care.

#### Clinic Call-Outs

Clinical call-outs are conducted five days a week at various times during the day depending upon who is working that day. The one full-time physician sees approximately eight patients per day, four days per week; the part-time doctor sees 12 patients per day when he is at the facility. A physician's assistant works extra service at the prison two to three hours in the morning five days per week and sees five to seven patients for chronic care, physicals and emergencies. Overall, the prison estimated they see about 220 call-out patients per month.

Woodbourne survey participants expressed some concerns about their ability to access a doctor when needed. Only one-quarter of survey participants reported never experiencing delays in seeing their clinical provider and nearly 30% said they frequently were delayed in getting clinic care. The responses on access to the clinic for Woodbourne were about average for CA-

visited prisons. Some of the delays were attributed to the refusal of sick call nurses to refer the patient, and several individuals said they had to repeatedly go to sick call before they were permitted to see a doctor.

Staff doesn't know how to talk to people. -- Anonymous

We remain concerned about the adequacy of clinic staff, particularly since a significant portion of the clinic appointments are performed by an extra service provider who is not permanently assigned to the facility.

Patients had mixed reviews of the clinic providers, although the overall response of the survey participants placed the prison in the top third of CA-visited facilities for the rating of clinic staff. Forty percent of survey participants assessed the providers as poor, but 18% thought they were good. As with the sick call nurses, there were several reports that the quality of care depended upon the clinic provider seeing the patient. Other concerns raised in the surveys were that the care was delayed, that some recommendations of the specialists were not implemented by the prison medical staff, and that some providers were reluctant to aggressively address the patients' medical problems, preferring to prescribe less expensive treatment that did not adequately treat the patient's condition.

#### Care for Patients with Chronic Medical Problems

#### Chronic Care

Woodbourne has as significant number of patients with chronic illnesses as illustrated in **Table F** below. Woodbourne survey participants reported the highest percentage (62%) of patients suffering from a serious or chronic medical condition of all CA-visited prisons. We attribute this in part to the older age of the prison population and the longer time these individuals have been incarcerated. Although all patients with a specific chronic condition are

not assigned to specific provider, the facility has designated specific nurses to monitor patients with certain illnesses; including HIV, hepatitis C (HCV), diabetes, asthma and hypertension. These nurses are responsible for patient education, paper work, coordination of laboratory testing and medical appointments; however, they do not participate in the appointments with the patient and the clinic provider.

**Table F – Summary of Woodbourne Patients with Chronic Medical Conditions** 

	HIV	AIDS	HCV	HIV & HCV	Asthma	Diabetes	Hypertension
Infected	23	17	92	11	117	78	117
% Infected	2.8%	2.1%	11.2%	1.3%	14.2%	9.5%	14.2%
Treated	22	N/A	1	0	115	76	115

# Hepatitis C (HCV)

We were concerned to learn that although the prison had identified 92 individuals infected with HCV, at the time of our visit no patient had been receiving treatment, and none had been on therapy during 2012 since the time of our visit. In May 2013, staff informed us that one person was being treated for HCV and three others were being prepared for potential treatment. The prison medical staff had no explanation for the lack of eligible candidates for therapy, but asserted that they believed all HCV-infected patients had either been through treatment or appropriately evaluated for therapy. With a new treatment regimen about to be approved by DOCCS for HCV care that has the potential for substantially improving the outcomes of antiretroviral therapy, we urge the prison medical staff to carefully review all current patients to determine whether they will benefit from the new triple-drug therapy. We urge the prison to undertake this effort promptly because we were informed that several individuals have filed grievances about denial of HCV therapy, and we received some complaints from HCV-infected survey respondents who objected to their inability to get access to the new HCV therapy.

# **HIV** and **AIDS**

With an estimated 5.2% of men incarcerated in DOCCS facilities infected with HIV,<sup>21</sup> Woodbourne has apparently identified a little more than half (2.8%) of the estimated HIV-infected population in the prison, if the department-wide figure is relevant to its patient population. Given the older age of the Woodbourne population, we suspect that an even greater percentage of its patient population may be HIV infected than the department-wide estimate. Of the 23 known HIV-infected patients, nearly all were on treatment, according to information provided by the facility. Although no Woodbourne prison provider is an HIV specialist, the medical staff reported that its HIV-infected patients are regularly seen by an infectious disease specialist every three to four months, and more frequently if unstable. We were also told that

<sup>21</sup> Maruschak, L. *HIV in Prisons*, 2001-2010, at Table 2 (2012).

when an HIV-infected patient is transferred to the facility, he is seen by the nurse coordinating HIV care.

Woodbourne reported that they have an aggressive HIV testing program conducted both by the facility and the outside contractor funded by the AIDS Institute to perform HIV support services, including an HIV testing program. The staff informed us that they knew the HIV status of 530 patients, representing a little less than two-thirds of its patient population. Despite these efforts, we were disappointed to learn from the staff that they were aware of only one individual being identified as HIV-infected by the outside contractor in the last six years and only two HIV-infected patients identified by the prison testing program during the same time period. On a positive note, Woodbourne is utilizing members from its Prisoners for AIDS Counseling and Education (PACE) program during its orientation as a way to inform its incoming population about AIDS and Hepatitis C. However, given the likelihood that during this time it is possible that 80 or more undetected HIV-infected patients had been at the prison, we believe additional efforts must be made to encourage at-risk individuals to seek testing.

#### Medication

Woodbourne does not have a pharmacy at the prison, but medications for its patient population are supplied by the hub pharmacy at Ulster C.F. The medical staff reported that during the last several years, the number of monthly prescriptions has increased from 500 to 600 per month to 2,000, the highest rate of any prison in the Sullivan hub. Prescriptions are faxed from the prison to the Ulster pharmacy each weekday, and medications are delivered the next day Monday through Friday. The medications are sent in an individual bag for each patient, which the patient must then pick up and sign for. Patients are told that for refills, they should submit their request for their medications five business days before they will run out of their supply of drugs.

Forty-two percent of survey participants reported that they sometimes have difficulties getting their medications. Although this figure suggests that some problems exist in timely delivery of medications, the response from Woodbourne patients was better than three-quarters of the CA-visited facilities concerning access to prescription medication.

#### Specialty Care

People incarcerated at Woodbourne in need of specialty services are generally sent to the out-patient specialty care clinics at Coxsackie Regional Medical Unit or Albany Medical Center. The prison conducts very few specialty clinics at the facility; only prosthetics, audiology and optometry clinics are held in the prison. The medical staff reported that the facility experiences the most difficulties in scheduling neurology consultations. In addition to Albany Medical Center, hospitalization occurs at Mt. Vernon Hospital and Westchester County Medical Center. Survey participants had mixed reviews of specialty care services. Fifty-nine percent of respondents said they sometimes experience delays in access to specialty care, a rate that is average for all CA-visited prisons; the median estimate by these individuals for the delay in specialty care was 60 days, the same figures as the median delay for all surveyed prisons. Individuals who went to specialty care appointments outside the facility raised concerns about

being shackled for many hours while they were transported to the medical facility, during the time they waited for the appointment, and during the return trip to the prison; they felt this process discouraged some patients from seeking specialty care. Similarly, 58% of survey participants reported that there was inadequate follow-up to the specialist's recommendations, a response that was comparable to the average response from other surveyed prisons.

### Continuous Quality Improvement Committee

The Quality Improvement Committee at Woodbourne holds quarterly meetings to review healthcare at the prison, including regular review of medical charts, monitoring healthcare indicators, and reviewing deaths and other important healthcare events. We reviewed the minutes of the quarterly QI meetings and were generally impressed with the level of reporting and actions taken to address identified issues. We commend the facility for performing regular chart reviews of patients with chronic conditions and the staff's efforts to address any noted deficiencies. We also note the regular attendance of the Regional Medical Director Dr. Whalen, which is an important addition to the QI committee.

## **DENTAL CARE**

We were impressed by the dental operation, which was generally praised by the prison population. Dental staff consists of two part-time dentists and one full-time dental assistant. The dental area contains two dental chairs. The dentist estimated that the dental staff sees seven to 12

patients per day and that approximately one-third of the patients seen are for emergencies. He reported that it takes about one week to schedule an appointment and that there was no waiting list for services. He told us that there have been no grievances filed about dental

Woodbourne was rated as having the best dental department among CA-visited prisons by most of the survey participants.

services for at least the last two years. Survey participants were generally complimentary of dental services. Two-thirds of respondents said the services were good and only 10% rated them as poor, representing the best rating of dental services for all CA-visited prisons. Moreover, survey respondents reported almost no delays in dental care. We note the dental staff has been at the prison for many years and we commend them for their dedication to their patients.

#### SUBSTANCE ABUSE TREATMENT PROGRAM

The Visiting Committee toured Woodbourne's Alcohol and Substance Abuse Treatment (ASAT) program. The ASAT program has a capacity for 35 individuals and was operating at its maximum capacity at the time of our visit.

The Visiting Committee met with one of the ASAT counselors, who informed the

What I didn't like about the program is that it utilized the punitive methods of the institution of forcing participants into the program. -- Anonymous

Visiting Committee that staffing levels have been low due to a vacancy. At the time of our visit, the authorized ASAT staffing consisted of one full-time counselor position, which had been vacant since 2009 and remained vacant as of May 2013, and two full-time program assistant (PA) positions, both of which

were filled with individuals who were certified as alcohol and substance abuse counselors (CASAC). One PA facilitated both the AM and PM modules for the general population, while the second PA facilitated the PM ASAT module for the SNU and appears to be responsible for conducting the weekly individual sessions with each participant. Treatment staff informed us that OASAS-approved training was currently being planned for the ASAT staff.

Upon their entry into DOCCS custody, incarcerated persons are screened for their need for substance abuse treatment. If it is deemed that the individual is in need of treatment, the program is added to his recommended program list, and he is placed on a waitlist until space in an ASAT program becomes available. Individuals usually attend ASAT programming within 6 to 12 months of their earliest release date.

A few individuals who responded to our survey expressed frustration with the ASAT program because they felt the program was either not relevant to their experiences, did not meet their needs, or was not run in manner conducive to effective treatment. More than 70% of survey participants felt that participating in a substance abuse program was at least slightly important to them, and 7% of survey respondents were currently on the waiting list for substance abuse treatment. Sixty-four percent of individuals surveyed were satisfied with the program, ranking Woodbourne highest of all CA-visited facilities for satisfaction with the prison's substance abuse program. We received a small sample of surveys evaluating specific areas of the ASAT program, but the results were too mixed to offer definitive conclusions.

According to data supplied by the facility at the time of our visit, there were two ASAT groups in general population consisting of 17 and 18 participants, respectively, and each group met once a day either in the morning or in the afternoon four days a week, Monday-Thursday. The staff estimated that the ratio of participants to staff is 15-1 for the ASAT program.

The visiting Committee was pleased to observe that the ASAT program participants were very much engaged during group and the obvious enthusiasm and commitment of the counselor we were able to interview. We found the area to be well-lit with informative posters and program regulations clearly posted.

While the CA was pleased to learn of the high estimation of the ASAT program by program participants in general, there is some concern regarding a decrease in program enrollment. For example, in 2010, 86 participants successfully completed the program. This was followed by a decrease in 2011, when 60 participants successfully completed the program and, according to the facility, 23 persons were removed. Removal from the program can occur as a result of (1) a disciplinary removal, when an individual is found in violation of important prison or program rules and/or is given more than 30 days keeplock; (2) inadequate program performance (e.g., failure to participate in the program or amassing more than two negative program evaluations); or (3) an administrative removal (e.g., if an individual is discharged or transferred to another facility unrelated to his performance in the program).

Overall, we commend the Woodbourne staff for the work they have been able to accomplish despite being short staffed. In addition, survey results seem to describe a program in which participants and staff are developing important therapeutic relations key to substance

abuse treatment. We urge Woodbourne to fill its vacancies in this program in order to expand the number of persons enrolled in the program and ensure the continuation of quality treatment.

# ADDITIONAL SERVICES

### General Library

The Visiting Committee toured both the general library and the law library at Woodbourne. The general library is open from 8:00 a.m. until 11:00 a.m. and again from 12:30 p.m. until 3:30 p.m., Mondays through Fridays. The capacity for the well-lit, airy room is 40 persons. When the library is at capacity, individuals desiring to use the library can return one hour later. There are no call outs to the library; people must visit during free time. On the days when the library is closed, book carts are used to distribute books. Individuals currently in disciplinary confinement are allowed to fill out requests, which are then filled by the library.

The library is staffed by one librarian and nine clerks, but it is only open when the librarian is present. The librarian asserted that staffing is sufficient and generally speaking, people incarcerated at Woodbourne rated the general library positively. Woodbourne ranked fourth out of 33 prisons surveyed in this area, with 79% of respondents reporting being sometimes or somewhat satisfied with library services, as compared to 41% system-wide. The computers in the library are for general use, contain instructional software that is mostly relevant to people seeking employment. The general library contains a large amount of periodicals and books arrayed in an open-stack design and offers a small selection of books in Spanish and Chinese. The Visiting Committee was pleased to note that the card catalogue is up-to-date. People incarcerated at Woodbourne are free to browse the stacks and can check out four books at a time in two-week cycles. Suggestion boxes are available for new book purchases. During our visit, it was mentioned that updated reference books and additional shelves for the expansion of the collection would greatly improve library conditions.

On a positive note, a recent coalition consisting of organizations run by Woodbourne's incarcerated population, including the Inmate Liaison Committee, authorized the purchase of a large television for the library. The television is intended both for educational use and entertainment and can be utilized by people with open modules. We commend the incarcerated men at Woodbourne for their willingness to create something meaningful for its population and to the Woodbourne administration for its willingness to collaborate and encourage innovative approaches to addressing the issue of educational resources.

#### Law Library

The law library is open every day, from 3:30 p.m. to 5:30 p.m., and again from 6:30 p.m. to 10:30 p.m., seven days a week. According to information provided by the facility, the law library is staffed by one part-time staff member and four clerks currently incarcerated at Woodbourne; it is only open when the staff member is present. There is no legal course at Woodbourne; all clerks have received training at another facility. The current staff member is not a notary; people incarcerated at Woodbourne must access a notary through the counselor's office. This library fills up quickly, and incarcerated persons need call-out slips in order to visit.

The equipment at the law library includes several computer terminals, as well as a typewriter. Some of the computers could be used only for research and some only for typing. According to individuals incarcerated at Woodbourne who were interviewed, as well as signs posted in the law library, at the time of our visit, multiple computers were not functioning. Photocopying is available, but there is a per-page charge. Law library clerks expressed concern about the equipment used in the law library.

Reviews of the law library at Woodbourne were relatively positive compared to other DOCCS prisons, according to our survey data. Forty-four percent of incarcerated persons surveyed at Woodbourne reported satisfaction with the law library, 23% were somewhat satisfied, and 32% expressed dissatisfaction, ranking Woodbourne's law library within the top third tier of all CA-visited facilities.

# Visiting

The visiting room is open Saturdays, Sundays and holidays, and incarcerated persons are only allowed one visit per week. There are six staff members assigned to visits. Some incarcerated persons expressed dissatisfaction with the facility's efficiency in the processing of

visitors, the infrequency of visiting days, and harassment by some staff. Specifically, several people interviewed by the Visiting Committee stated that sometimes officers were rude or impolite to visitors. There is a parking lot directly outside the visiting room.

Sometimes the COs treat our visitors and family members like convicts. -- Anonymous

However, if visitors arrive prior to the start of visiting hours at 9:00 a.m., they must wait outside the front gates unprotected from the weather until visiting begins.

The Visiting Committee was pleased to find that the size of the visiting room at Woodbourne is adequate, with a maximum capacity of 234. Some incarcerated persons complained that the visiting room is not wheelchair accessible. The visiting area is equipped with lockers, a packaging room, and a room for processing, and there are vending machines available in the room, as well as several microwaves. Visitors are given the opportunity to deposit money for people incarcerated at Woodbourne.

The children's area at Woodbourne is open and available to the men incarcerated at Woodbourne and their children. Osborne Association volunteers are present as well to look after visiting children. Although the children's area has a relatively small capacity, the staff assured the Visiting Committee that this has not been problematic. The area includes chairs, games, and books. The CA was pleased to find a positive environment in which people in prison can spend much-needed time with their children, an essential part of maintaining family connections outside the prison system that serves to facilitate the successful reentry of individuals once they are released back to their respective communities.

Thirty-seven percent of people incarcerated at Woodbourne reported satisfaction with the visiting program at this facility, placing it within the top third of all prisons surveyed.

<sup>&</sup>lt;sup>22</sup> Woodbourne ranked ninth out of 33 CA-visited facilities.

Dissatisfaction ratings were significantly lower than average (37% at Woodbourne as opposed to 51% system-wide).

# Family Reunification Program

Woodbourne offers a wheelchair-accessible Family Reunion Program that allows people incarcerated at the facility to receive two conjugal visits per year. While this is a program that is most welcomed by those who qualify for these visits, it was pointed out to the Visiting Committee that many facilities allow up to six visits per year. Apparently, the problem is not one of capacity, as not all the trailers earmarked for such visits are being used. The problem, according to the people the Visiting Committee interviewed, is a seemingly arbitrary, unofficial policy of allowing only two visits per year as opposed to the six visits per year. Comments by persons eligible for the Family Reunification Program included observations on the importance of maintaining family ties and the critical role family relations play in successful reentry to society.

# **Commissary**

At the time of our visit, the Commissary appeared well stocked and clean. One full-time civilian employee and additional volunteers staff the commissary. Staff indicated that the commissary could use additional staffing. According to staff, call-outs for the commissary generally take place two times per day, five days a week, from 9:30-11am and 12:30-3:30 pm. Incarcerated person visits to the commissary occur once every two weeks. The facility offers commissary buy sheets in Spanish, although they appeared to be of questionable quality. There is a \$55 limit on purchases, and staff indicated that some persons reach that limit.

Survey respondents rated commissary services at Woodbourne higher than most prisons, placing it within the top tenth of all facilities surveyed. Sixty-six percent of all respondents were at least somewhat satisfied by these services, while the average for all prisons surveyed was only 39% satisfied or somewhat satisfied.

#### Mail and Packages

From a systemic standpoint, DOCCS mail and package services generally tend to receive low rates of satisfaction. In contrast, Woodbourne placed within the top third of prisons surveyed, with 69% of survey participants at least somewhat satisfied with these services, as compared to a 36% average for all surveyed prisons. While, generally speaking, Woodbourne survey participants rated the mail favorably, several mentioned that receipt of mail and packages are sometimes problematic, depending on the officer in charge at a given time. That being said, in 2011, only five packages grievances were filed, a decrease from 16 in 2010.

However, Woodbourne could increase satisfaction by addressing some survey comments indicating concerns over a lack of notice about changes in mail and package policies, as well as issues with lost mail, and packages being held too long, resulting in food spoilage.

#### **Food Services**

The Visiting Committee toured the mess hall and the kitchen at Woodbourne. At the time of our visit, the kitchen was in the process of being renovated. We were informed by staff that attendance at meals fluctuates slightly with an estimated 86% of the population being served. People incarcerated at Woodbourne are given 20 minutes for each meal. At the time of our visit, the mess hall was staffed by three civilian cooks, with two additional cook vacancies, as well as 120 incarcerated kitchen workers.

At the time of our visit, there were 90 incarcerated persons on special diets for medical reasons and 14 on kosher diets. Additionally, there were 30 meals delivered to "feed-ins" for people who were unable to go to the mess hall. Staff indicated that 90% or more of the meals served at Woodbourne are made through the cook-chill program, meaning the bulk food is cooked and immediately chilled at DOCCS' central food processing center, then delivered to Woodbourne for later use. Staff also stated that the facility offers fresh fruit two or three times per week.

Our survey data indicates that food services generally received low satisfaction rankings at all CA-visited facilities, with an average of 69% of all CA-surveyed persons expressing dissatisfaction. Similarly, Woodbourne placed within the middle third of all prisons surveyed for food satisfaction, with 69% of prisoners expressing dissatisfaction. A slighter higher-than-average 57% of people incarcerated at Woodbourne felt dissatisfied with the quantity of the food offered and 67% were dissatisfied with food nutrition.

There is a growing concern from incarcerated persons regarding meals containing large amounts of soy and soy products. A number of survey respondents took issue with the overuse of soy, with one respondent indicating that the use of soy products "is causing health problems in other states and such problems are ignored here," and asking "Why do we have to eat so much soy stuff when it's not healthy especially for men?" While the CA does not have a position on the health impacts on soy (especially with concerns regarding the effect of soy estrogen on men), we would urge staff to meet with the ILC to discuss these concerns.

### Recommendations

We recommend that state policy makers work with DOCCS Central Office administrators and facility officials to implement the following measures:

#### Educational, Vocational, and Transitional Services Programs

- Increase job opportunities for incarcerated persons so that individuals may learn additional skills besides the very limited skill set needed for porter positions.
- Assess the specific programmatic and educational needs of the aging population and persons who have served longer sentences and address them by implementing programs.
- Expand opportunities for higher education and other programs for incarcerated persons who have completed their GED.

- Implement additional vocational programs, update the material and equipment available in existing vocational programs, and align vocational programs to current employment needs in the communities to which participants will return.
- Employ educational and vocational staff who are conversant in Spanish.
- Decrease the number of people on the waitlists for T4C, transitional services Phase III, and ART, by increasing the number of courses offered.
- Explore mechanisms for better integrating community service providers, community peer mentors, and/or employers into transitional services programs, as well as identifying and distributing more timely employment, education, housing, and other resources to participants.
- Institute new methods for actually enrolling or connecting people to community employment, education, housing, medical, and other resources prior to release.
- Increase the rate of pay for individuals at Woodbourne and all DOCCS facilities to reflect increases in the cost of items in the commissary.

#### **Special Programs**

- Consider relocating the housing and program space for the SNU to ensure an appropriate environment.
- Consider providing additional supports to visually challenged persons, including classrooms
  designed for those with visual challenges, specific instruction on skills needed by visually
  challenged people, and improved televisions and other equipment appropriate for such
  persons.

# **Substance Abuse Treatment Programs**

- Ensure that staffing is brought up to date, vacancies are filled and ASAT staff play an active role in meaningful individual and group therapy.
- Enhance clinical supervision of the program.
- Improve substance abuse intake and screening mechanisms, and more effectively tailor treatment to an individual's particular needs.
- Strive to ensure conformity with the principles of a Therapeutic Community model in ASAT programs, and ensure TC components operate in a manner that is therapeutic.

### Parole

- Ensure that all relevant staff are properly trained in new parole guidelines and that the risk-assessment tool (COMPAS) is being properly implemented and utilized.
- Ensure that all candidates for parole are given adequate pre-parole hearing time to fill out the risk assessment tool.
- Review procedures for parole hearings with staff so that they are properly observed during parole hearings.
- Reassess policies and practices of the Parole Board to ensure that decisions are made based on the applicant's readiness for reentry and rehabilitation and growth while incarcerated, rather than simply the nature of the applicant's original crime.

#### **Medical Care**

- Fill all vacant medical positions and investigate whether additional nursing and clinic provider positions should be allocated to the prison to ensure that all patients get prompt access to sick call and clinic call-outs.
- Review the quality of sick call and clinic encounters for each sick call nurse and clinic provider to ensure that all staff are providing timely and appropriate care to their patients.
- Enhance efforts to reduce the delay in getting patients seen for medical call-outs.
- Implement measures to ensure that HCV-infected patients are thoroughly evaluated to determine if they are appropriate candidates for treatment.
- Enhance efforts to encourage at-risk individuals to seek HIV testing and care.
- Review the utilization of specialty care services to determine if all patients are getting prompt access to all needed specialty care services.
- Review the response of the prison providers to specialist recommendations to ensure that these recommendations are promptly reviewed and implemented in a timely manner.

# Safety and Grievance Program

- Investigate any trends in the increase in the number of grievances filed against staff conduct for 2010 and 2011.
- Encourage line staff to engage incarcerated persons in more positive interactions, including through recruitment of minority staff and additional race relations training for staff

### **Other Services**

- Assess allegations of harassment of visitors in the visiting room.
- Make the visiting room wheelchair accessible.
- Review policy of only allowing two family reunion program visits per year, and undertake steps to ensure that Woodbourne's policies are consistent with system-wide practice.
- Ensure that all rules and regulations regarding mail and packages are made clear to the prison population.
- Review mail and package room policies to ensure that all staff is operating under the same guidelines and interpreting the mail directive in a consistent manner.
- Expand the law library hours and/or capacity.
- Consider hiring a civilian law librarian.
- Review whether the staff working in the law library can be certified as a notary to increase the population's access to notary services.
- Review food policies, including assuring that meals are nutritious and balanced.

We commend the Woodbourne staff and the men incarcerated there for their efforts in creating a relatively safe environment and especially for their demonstrated commitment to education. The importance of education inside prisons and its power to transform lives cannot be

stressed enough. As evidenced by numerous studies, <sup>23</sup> educational programs facilitate personal growth, increase post-incarceration opportunities for employment, and are highly correlated to successful reentry. However, academic (and vocational) programs are not just about budgets or staffing levels; enrollments or educational attainment; recidivism rates or employment. Education plays a crucial role in the self-actualization of participants as well as the empowerment of those participants to not only improve their own lives but the lives of those around them.

We would also endeavor to highlight one specific issue and concern that has inserted itself throughout this discussion. Specifically concerning to us is the plight of older incarcerated persons, such as those incarcerated at Woodbourne, who seem to languish behind prison walls in an environment designed for younger, healthier persons. As previously noted, the parole process at the time of our visit did not seem to be in compliance with the recent changes in parole processes, and there were a significant number of people serving long-term sentences at Woodbourne who had been repeatedly denied parole. Compounding the problem of long-term confinement is that, for the most part, there are no vocational or educational programs specifically designed to address the needs and challenges presented by an older population. <sup>24</sup> In addition, because of their higher rates of illness and impairments, older incarcerated persons serving longer sentences pose medical problems that are much more challenging than they are for younger incarcerated persons.

How to go about addressing an aging prison population is complicated, not to mention a bureaucratic quagmire. However, there is an array of possible avenues to explore. Woodbourne's administration should be rightfully commended for taking some initial steps in this direction. However, should Woodbourne and the Department choose to be more proactive in addressing the needs of the prison's older incarcerated population -- for example, tending to the needs of the older incarcerated population and implementing measures that would assist with vocational and educational programs, jobs, and specialized medical care -- it could serve as a model for other state prisons in New York and throughout the country. Activities for older incarcerated persons should involve activities such as crafts in spaces apart from their sleeping quarters, programs, peer-led initiatives, attentiveness to their cognitive status, and medical care services specially designed for older persons. Daily maintenance and attention to the needs of the rapidly growing elderly population are the best options in the end. On the other hand, failure to address the needs of this population will make successful reentry less likely, while at the same time creating a more costly situation for taxpayers in the future.

<sup>&</sup>lt;sup>23</sup> See page 27 of Testimony by Jack Beck, Director, Prison Visiting Project, on Educational and Vocational Programs in NY Prisons, Sate Assembly (2012) for a listing of such studies

Human Rights Watch. (2012). *Old behind bars: The aging prison population in the United States*. from http://www.hrw.org/reports/2012/01/27/old-behind-bars.