“FROM THE INSIDE OUT”

A report by the
Prison Watch Community Oversight Initiative

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Dear Friends,

We have spent the past year, since the debut of “From the Inside Out,” listening to, reading and discussing the testimonies of people confined in New Jersey's state prisons. In this issue, we expand our gaze to testimonies from the county jails, which are regulated and monitored by the State, but operated by the many county governments. The political considerations, which flow from this model of governance limit effective implementation of State recommendations or requirements, leaving jail prisoners subject to inconsistent rules and conditions of their confinement.

By the one year mark, it had become clear to us that the phenomenon of mass incarceration could not be understood solely by looking at the prisons - because ALL incarceration starts at the jail level. Therefore, this issue will focus, as best we can, on the experiences of people in the county jails. The materials below are intended to give some examples of the problems faced in our jails,

Some Background

A fractured system
Sadly, most jails, not just in New Jersey, but throughout our nation, are likely to be even less humane than our prisons. At the prison level, individuals are confined for long periods of time, and have greater opportunities to communicate their experiences to the outside world. And with centralized supervision at the State level, resolution of individual and systemic problems, while still unsatisfactory, has a greater chance of being achieved. In the county jails, prisoners are more transient and, without centralized oversight, communication from prisoners and meaningful resolution of problems are likely to be much more limited. Fewer reports of problems surface under these circumstances, except for deaths, which must be reported to outside agencies.

In 2017, far too many suicides and deaths have been reported. But, the majority of serious incidents resulting in non-lethal harm are either covered up or unexplained.

A Captive Population; A Dangerous Cauldron
Jails primarily confine people who have been living in poverty and cannot afford private attorneys. Even with New Jersey's new bail law, many still languish in jail, because they have been charged with serious offenses that are untouched by the new law. Because of extreme shortages in public defender and judicial personnel, creating huge backlogs in the courts for all defendants, many people, not yet convicted, wait for many months,
if not years in the jails, along with people convicted and sentenced to short jail terms. This latter group includes a troublesome percentage of people with serious mental illness who would have been treated in psychiatric hospitals in the past, but have fallen into the "correctional" system, because of lack of access to appropriate treatment in an imperfectly deinstitutionalized mental health system.

The mix of people charged with serious crimes, those who would be better served in treatment facilities, and those who have been convicted and sentenced to short jail terms, creates an impossible and dangerous challenge to the under-resourced county jails.

While waiting for justice in this environment, individuals die, due to inadequate medical care, inadequate mental health and substance abuse treatment, and suicide - and from a pervasive lack of hope in a barren, dangerous world.

Impact on Criminal "Justice"
It is easy to see why individuals that are not guilty of a crime will take a ‘plea’ - worn down by months away from their support systems, their families, their children and their homes. They have lost everything, but just to get out of jail they will agree to a plea of guilty. Under any other circumstances, this would be considered coercion.

The New Civil Prisoners
In the past decade, a new type of civil detention has sprung up - imposed on the traditional county jails. These are the ICE (Immigration and Customs Enforcement) Detention Centers, which often take the horrors and trauma of the county jail to an entirely new low. If you can imagine being jailed as a family, with your children (even infants) in the jail environment, with limited communication to the outside world, no stimulation, education, or pediatric care for the children, and absolutely no timeline or end date - you have pictured a Detention Center. Here no one cares if you cannot effectively communicate with the corrections staff, or if your child is ill or not being educated. Your hearing date could be anywhere from 4 months to a year away. In that time, you are literally at the mercy of the staff, with no way to reach out, no ‘rights’ to fair and speedy handling, no support, and little hope.

Even more frightening, these Detention Centers are becoming more and more privatized. You may have heard this term on the news, or in a newspaper article. It means that instead of State, County, or Federal workers running a facility - with some accountability to the public - they are operated by fully private, for-profit, industries. This cuts oversight out almost completely.
This quarter's issue of From the Inside Out is virtually devoid of the direct testimonies we have had in every previous issue, primarily because of the transitory nature of the county jails,¹ the paucity of advocates and procedural protections for prisoners, the restrictions on outside communications, and the lack of regulatory oversight by the state. So what we have documented here are the issues that have made it as far as the news cycle.

In New Jersey, with the “bail reform” that has been in place since January 2017, the jail population has significantly decreased. But that development has actually created a more dangerous dynamic within the walls. Left inside are the following: those accused of the most violent crimes; those most mentally ill who lack the capacity to “adjust” to jail conditions or speak for themselves at a hearing; those who are sentenced to minor, municipal crimes; those charged with violating Probation or Parole; and now, ICE detainees with their families, who have not been accused of non-immigration offenses.

This combination creates an even more volatile mix of prisoners, in which communication issues, frustration and anger can often erupt into violence. Many corrections employees are not equipped to deal with this new mix. They are poorly trained and, as documented below, this manifests in the use of force, in situations that could be avoided with appropriate housing and enhanced language and other training of staff.

To change criminal justice policy in any meaningful way means to propose changing a very long-standing system. It's not realistic to think you can do it overnight.

- Kamala Harris

¹ By the time the request is in the jail, the individuals are gone- released to house arrest, or with fines paid or time served.
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Why Jails?

What’s behind the troubling growth of rural jails
Pretrial detention, or when people are held in jails while they await a hearing, is on the rise in rural counties, even as the jail incarceration rate in big cities is decreasing due to efforts to reduce jail sizes, according to a new study from the Vera Institute of Justice and Safety and Justice Challenge. About 6 out of 10 people inside jails are now held on pretrial detention, while people with actual convictions make up the minority share.

Pretrial detention can have serious consequences for people caught up in the system, such as time lost from their jobs or from their families. The most infamous case may be that of Sandra Bland, a woman who was arrested for assault during a traffic stop and died in jail three days later. People detained in rural jails may wait longer to get a hearing because circuit judges may only appear in district court a few times a month or even each year, the report noted.

"There are a whole host of personal, family and community harms that come from even two days in jail," said Ram Subramanian, a co-author of the study. "You are at risk of losing your job or losing a couple days of salary, or even whether you can keep your employment."

Pretrial incarceration rates grew the most in the more than 1,900 rural counties in America, reaching a rate of 265 per 100,00 people, compared with 200 for large urban centers.

Critics of pretrial detention call the practice unfair, since it penalizes people who don’t have the money to post bail while those with deeper pockets can sidestep the local jail. Ultimately, the practice may cost taxpayers, who are footing the bill for people held in jail while the await a hearing on issues such as traffic violations, driving under the influence or theft.


As Davis County changes its policies to prevent jail deaths, a Utah lawmaker plans a bill requiring annual reports on inmate fatalities
A Utah lawmaker is planning to introduce a proposal to require county jails and state prisons to submit yearly reports on deaths and how they handle opioids and other medications amid renewed emphasis on inmate fatalities.
Meanwhile, Davis County Sheriff Todd Richardson said recently his office has begun a review of policies and procedures after several deaths in summer 2016. Those, along with a fatal injury suffered by an inmate in December, triggered heavy public scrutiny of jails around the state. "When all of this started happening, we looked at what was going on," Richardson said. "And with our changes, this year, it stopped."
Changes include more elaborate specifications and requirements during the process of screening people upon arrival at the jail; additional training and procedural direction for nurses and jailers; and a policy section warning personnel against any "deliberate indifference" to the health and safety of inmates, the Standard-Examiner reported.

Emergency medical technician training is being given to some jailers, so first-line EMT service will be on hand during emergencies, Richardson said. And outside EMTs and ambulance crews dispatched to the jail during medical emergencies will be given quicker access through jail security, he said.

"We've made a lot of adjustments and named some new captains," including a new jail commander in January, Richardson said.

Records gathered by the Standard-Examiner show at least 24 deaths involving Utah jails occurred in 2016, a 17-year high.

Two Women Say They Lost Pregnancies In Immigrant Detention Since July

Immigration and Customs Enforcement disputes elements of their stories. But lawyers and immigrant rights groups fear an alarming trend is developing under the Trump administration.  

https://www.huffingtonpost.com/entry/immigrant-detention-pregnancy_us_59cbaee4e4b05063fe0e211b

AUSTIN, Texas ― Jennye Pagoada López approached the San Ysidro border crossing that connects Tijuana with San Diego on July 23, and handed a Customs and Border Protection agent her identification and an ultrasound scan from a Mexican clinic. She was at least two months pregnant.

Agents escorted Pagoada to a room filled with other Central American and Mexican women, most of whom were travelling with children. At least one other woman was also pregnant, she said. She waited there through the night, sleeping on the floor.

Early the next morning, she started feeling pain in her stomach and the urge to go to the bathroom. When she did, she saw that her underwear was stained. “I started bleeding, but a lot,” she told HuffPost. “It was like that the whole morning, in pain and bleeding.

She said she asked agents for help, but was forced to stay in the holding room all day, until around 5 p.m. Instead of sending her to a doctor or releasing her with a notice to appear in immigration court, which often happens with asylum-seekers, agents then transferred her to the custody of Immigration and Customs Enforcement at the Otay Mesa Detention Center, outside San Diego. “They took my information, my fingerprints, photographs,” she told HuffPost. “And I told them, ‘I’m bleeding.’ And they kept telling me to keep waiting.”

She wasn’t able to see a doctor until three days later, and it wasn’t until another three days after that another doctor informed her that she was no longer pregnant. “They didn’t do anything,” Pagoada told HuffPost. “They didn’t even give me pills for the pain.”

ICE isn’t supposed to detain pregnant women

According to ICE policy, Pagoada should never have been detained at all. A 2016 memo states that pregnant women should only be locked up in immigrant detention centers in “extraordinary circumstances.”

Despite this, the agency acknowledges detaining hundreds of pregnant women annually. Three of them miscarried in ICE custody so far this year, according to the agency — the same number reported last year.

Last year’s memo restricting the detention of pregnant women — which makes exceptions for those who present a national security threat or those who are subjected to mandatory detention — elaborated on a 2011 directive that also said pregnant women should generally be freed from immigrant detention.

Over the last fiscal year ICE detained nearly 68,000 women, including 525 who were pregnant. ICE would only provide data going back to February 2016, when the agency said it changed its methodology for compiling statistics on pregnant detainees. That data includes eight months of the 2016 fiscal year, from February 2016 through Sept. 30, 2016. During that time, the agency detained 58,000 women, including 353 who were pregnant.

For its part, ICE says it “is committed to ensuring the health, safety, and welfare of all those in our care,” according to spokeswoman Jennifer Elzea in an email to HuffPost. “In addition to
pregnancy screenings at intake, ICE detention facilities provide onsite prenatal care and education, as well as remote access to specialists for pregnant women who remain in custody.” But advocates and legal groups who work with detained women say they’ve noticed an alarming trend of more pregnant women getting detained, as the Trump administration ramps up immigration arrests more generally.

Seven immigrant rights and legal groups — including RAICES, the American Civil Liberties Union and the Women’s Refugee Commission — filed a complaint Tuesday with the Department of Homeland Security’s Office for Civil Rights and Civil Liberties, asking them to investigate whether the agency was violating its own policy on detaining pregnant women.

“We are gravely concerned with the agency’s failure to abide by its own policy against detaining pregnant women, the detention conditions that have been reported by pregnant women in various detention facilities across the country, and the lack of quality medical care provided to women who are pregnant or have suffered miscarriages while in custody,” the complaint reads.

MENTAL HEALTH

"Call to action’ aims to reduce number of mentally ill in county jail (Minnesota)

"When we have people that are having an acute mental health crisis and they break down in our community—if there is no place else for them to go—we send them to jail," Houle told the commissioners at their Committee of the Whole meeting on Tuesday.

The strategic shift from jail/detox/hospital to assessment/triage/stabilization and future options such as crisis services and stabilization beds/intensive residential treatment services/chemical dependency and/or mental health treatment and services, respectively, began in 2011.

"It is a crisis in our community," Houle said of mental illnesses. "We see it in the jail, we see it in probation, we see it throughout the criminal justice system, we see it in child protection. We see it everywhere in our system."

According to officials, jails spend two to three times more on adults with mental illnesses that require interventions compared to those who are not, and without appropriate treatment and services, the mentally ill will continue to cycle through the criminal justice system. "If somebody comes into the jail and they have a broken leg, we take them to the emergency room and treat them medically," Houle told the county commissioners. "If somebody comes into the jail with a mental health crisis, they don't go anywhere. They just stay there."

According to county officials, prevalence rates of serious mental illnesses in jails are three to six times higher than for the general population and almost three-quarters of adults with serious mental illnesses in jails have co-occurring substance use disorders.

"You need to understand that—in my estimation—mental health is the No. 1 crisis that we are facing in county government. It has legs everywhere," Houle told commissioners at Tuesday’s meeting at the Crow Wing County Historic Courthouse on Laurel Street.

"We used to have a state hospital ... 2-to-1 staff ratio, psychiatrists on staff who could help administer medication—sometimes voluntarily, sometimes involuntary—for someone who needed to be committed."

Adults with mental illnesses "tend to stay longer in jail and, upon release, are at a higher risk of recidivism than people without these disorders," according to a draft of a board resolution for a call to action to reduce the number of mentally ill in the county jail.

In Prison and Jail, Women Are 9 Times More Likely to Be HIV-Positive

Men are roughly four times more likely to be diagnosed HIV-positive than women in this country. Unique in the world, the United States HIV crisis still primarily affects gay and bisexual men, particularly young, black, gay men.

The one place where women’s HIV prevalence reaches and sometimes exceeds that of men is in our jails and prisons. Though the percentage of women in state and federal prisons with HIV has been on the decline for nearly two decades, the rates still far outpace the national averages:

According to the most recent numbers from the Bureau of Justice Statistics, which collects data from inmates in state and federal correctional facilities, 1.3 percent of female inmates are HIV-positive. If that doesn’t sound high, consider that the HIV infection rate for the general female population is only 0.14 percent. That means that women in state and federal correctional facilities are over nine times more likely to be HIV-infected than women on the outside.

And those numbers don’t even account for what can be higher rates of HIV infection among women in jails. While prisons generally hold people convicted of felonies for sentences that are longer than one year, jails—the roughly 3,000 county or municipality-run detention facilities in communities across the country—temporarily hold people arrested but not yet convicted of a crime. Most incarcerated women today are in jails, and jails are transient places, with people constantly moving in and out. HIV-prevalence rates are often much higher in jails than they are in prisons—one study that reviewed jail health records from 2009–10 found that 9 percent of newly incarcerated women in New York City jails were HIV-positive.

“Jails and prisons are places where a disproportional number of HIV-infected women end up, primarily because both HIV and incarceration target those who are poor,” says Dr. Anne Spaulding, an infectious disease physician who has provided care for women and men with HIV and hepatitis C in prisons and jails for the past two decades.

What accounts for this glaring disparity? For one thing, the number of women in jail, prison, and on probation is ballooning. More women than ever before are being sent to jail and prisons, and the growth has largely impacted the most socially and economically disadvantaged: black women, Latina women, and women living in poverty.

Women in jails are now the fastest-growing incarcerated population in the country. Among women, rates of state and federal imprisonment were highest for adult black women ages 30–34 years (264 per 100,000), followed by Latina (174 per 100,000), and white women (163 per 100,000). Black women were between 1.6 and 4.1 times as likely to be imprisoned as white women of any age group. Thanks to stricter drug-enforcement laws and expanding law-enforcement efforts, the case of incarcerated women and HIV is truly one in which social, economic, racial, and gender inequity have created multiple, intersecting challenges for women who often lack robust social safety nets in the first place.

The types of activities and circumstances that are putting more women into contact with law enforcement are the same ones that are also putting them at increased risk of HIV infection. Women in state and federal prisons are more likely to be incarcerated for drug and property offenses than their male counterparts. Incarcerated women are more likely to have substance-abuse issues and report more frequent drug use and use of harder drugs compared...
with incarcerated men, according to the Bureau of Justice Statistics. Needless to say, substance abuse has been linked to HIV through several mechanisms, most notably through shared needles among injection-drug users. Women who exchange sex for money, food, shelter, or drugs are also at a greater risk of being arrested, street-based workers much more so.

https://www.thenation.com/article/in-prison-women-are-9-times-more-likely-to-be-hiv-positive/

VISITATION

NJ jails doing away with family visitation. Critics argue why that’s a bad idea

By David Matthau

Some county jails in New Jersey are no longer allowing visitors to have direct face-to-face contact with inmates. Instead, they are offered a video visit. Jails in Camden, Cape May, Cumberland, Passaic and Salem are now using video visitation, and only Cumberland is still offering in-person visits as an option.

“This is an issue because one of the most important ways that incarcerated people can stay in touch with their families is via visitation,” said Peter Wagner, the executive director of the Prison Policy Initiative.

Karina Wilkinson, an advocate with the group New Jersey Phone Justice campaign, said several studies have been done that show “the best way to help incarcerated individuals with reentry is for them to maintain contact with their families and their community. It’s just there isn’t a substitute for face to face contact.”

She pointed out some people are also unhappy with the video visit system because the connection is terrible.

“It seems like they don’t have the bandwidth set up. The quality is so poor and the sound goes off. There’s delays and things like that.”

She said to do a video visit remotely, from your home or some other location, people are charged a fee.

“Each jail is different. They range from usually like $10 for 20 minutes (or) $12 for 20 minutes.” Legislation that is pending in Trenton would make in-person visits a mandatory option, and cap what visitors could be charged for a video visit at 11 cents a minute.

She said a 2014 Department of Justice report found benefits to offering video visits as one option, but in-person face-to-face visits should still be allowed.

Wagner pointed out people in these facilities are not hardened criminals for the most part, and they either haven’t been convicted of anything yet or they’re serving a relatively short sentence.

Essex County Jail

**Woman accused of killing girlfriend dies**

A woman in county jail on accusations that she killed a girlfriend she was once arrested with has died, officials confirmed.

Turqoise Williams, 30, a Newark woman arrested on murder, witness tampering, weapons, and other charges on May 5, died while in the Essex County Correctional Facility on Oct. 22, a spokeswoman for the Essex County Prosecutor’s Office confirmed.

The cause and manner of her death are pending the results of a medical examiner’s report, Authorities have declined to comment on whether or not Williams' death is suspicious, citing the forthcoming autopsy results.

A 34-year-old inmate who died in the Passaic County Jail last month was ordered to give a urine sample just hours before he was found unconscious in a cell in the medical unit, incident reports show.

Tyree Lusk of Paterson was taken to the jail's medical unit on the afternoon of July 23, four days after he was arrested and charged with drug offenses and with participating in the vicious beating and robbery of a 77-year-old gas station attendant in Fair Lawn. Jail guards took him there to undergo a urinalysis, according to incident reports obtained from the Sheriff's Office though a request made under the Open Public Records Act. Although they are relatively common procedures in the jailhouse infirmary, urine screenings are not routine. Once behind bars, inmates are screened only if they are suspected of being under the influence of drugs.

Whether Lusk was using drugs is still not clear. He spilled the cup after giving a urine sample — then died a few hours later, before another one could be obtained, according to reports. Another officer, Robert Marut, reported that he was checking on inmates at 6:13 p.m. when he found Lusk "sitting upright against the wall with his head leaned back towards the wall with his eyes open. I asked inmate Lusk if he was okay, and he was unresponsive."

An ambulance arrived at about 6:23 p.m. to take Lusk to St. Joseph's Regional Medical Center in Paterson, where he was pronounced dead.

An autopsy was performed by the state Medical Examiner's Office to determine the cause of death. Those results had not been released as of Monday.

Thus, it remains unclear why Lusk became the subject of a drug screening four days after he was admitted to the Passaic County Jail. Under normal protocol, inmates are supposed to be screened for any health problems, including drug use and addiction, when they are first brought into the jail.

Inadequate health care was one of the primary issues behind a class-action lawsuit filed in 2008 by the American Civil Liberties Union and Seton Hall law school against the Passaic County Jail. To settle that case, Passaic County was required to invest millions to improve living conditions and to reduce overcrowding at the jail, which was built in 1954.

Although there have been numerous inmate deaths over the years, Lusk is the first inmate to have died in 2017.
Jail inmate shackled during surgery, recovery despite doc’s objection, suit says

A jail inmate who says he was shackled during emergency surgery and restrained for days after despite objections by his doctors has filed a lawsuit alleging the treatment caused complications that required a second surgery.

Benjamin J. Davis, 24, of Cherry Hill, filed the federal civil rights lawsuit in Camden on Friday against the Cape May County jail and various officials involved in the decision to keep him restrained.

Davis began serving a 180-day sentence in December for driving on a suspended license and a disorderly person offense and he began experiencing "severe abdominal aches" on Jan. 10, the lawsuit said.

Despite repeated pleas for medical attention, he wasn't examined until roughly 12 hours later, the suit alleges.

Davis was diagnosed at Cape Regional Medical Center appendicitis and doctors determined he needed an emergency procedure, according to the suit.

After the surgery, Davis was again shackled and handcuffed to a hospital bed. Later, the surgeon insisted on removing the restraints and allowing Davis to move around so that he could recover properly, according to the suit.

The surgeon allegedly told the officers that Davis' organs were "shutting down, his intestinal track was becoming kinked, and he was not recovering as he should" because he was not being allowed to move around, the lawsuit said.

Roughly four or five days after the initial surgery, Davis’ nurse reiterated that Davis needed to move around the room to recover properly, but the officers continued to refuse, prompting a verbal argument between the nurse and one of the officers, according to the suit.

Davis returned to the jail after 12 days in the hospital. He lost 30 pounds and remained in "continuous and severe pain," the suit alleges.

RENEWED CALLS FOR MONITOR AFTER 2 DEATHS AT HUDSON COUNTY JAIL

Advocates claim inadequate medical care led to death of Rolando Espinoza, an immigrant detainee. The death of two inmates from the Hudson County Correctional Center, one an immigration detainee from Long Island, has advocates renewing calls for an independent monitor of the jail and stepping up efforts to get the county to end its agreements with federal immigration authorities.

Detainee Rolando Meza Espinoza, 43, died in June after collapsing at the Hudson jail. His attorney says Espinoza, a Salvadoran national, had informed ICE agents and jail officials that he suffered from anemia, cirrhosis, and diabetes, but that medical staff only treated his diabetes. He died June 10 at Jersey City Medical Center, where he was taken after he collapsed. Espinoza’s was not the only death at the facility this spring. A 48-year-old Weehawken woman, Jennifer Towles, who was serving a six-month sentence for driving while under the influence, died July 14, according to press reports.

The deaths have renewed efforts by advocates for an independent monitor at the jail, which they say would provide oversight and could serve as a liaison for detainees who have little trust in jail and ICE officials because they are arms of the government. Advocates say the two ad hoc committees created by the Hudson County Freeholders — one created a year ago charged with reviewing jail activities and a second just created in June in response to Espinoza’s death — have too much representation from Hudson County officials and are not likely to act independently.

Sally Pillar, of First Friends of New York and New Jersey, which advocates for detainees in both states, said a “permanent oversight board in Hudson might be a platform to create similar kinds of boards in other jurisdictions.”

“It is not to say that Essex, Elizabeth, or Bergen may not have those kinds of issues,” she said of the Hudson jail. “Our goal would be to go on tours and start looking at these other facilities as
well. We as advocates need to look at all of the facilities with ICE contracts and hold them accountable.”
The latest CFG contract was awarded despite a federal complaint filed by First Friends of New York and New Jersey and Community Initiatives for Visiting Immigrants in Confinement, two immigration advocacy groups. The complaint, filed May 11, 2016, said that medical issues were consistently being raised by detainees in interviews with advocates, which “demonstrates(s) a pattern and practice of substandard care.” These complaints, according to the filing, included: delays in request for treatment and denials of care requests; failure to communicate properly with non-English speaking detainees; over-medication that resulted in “everything from fatigue to memory lapse to coma-like states”; use of shackles when transporting detainees to outside medical care; lack of continuity of care; failure to provide medications upon release; limitations on access to care; and sanitary issues in the facility that create health risks.
It called on ICE to “take immediate steps to improve Hudson’s health care practices, including … appointing an independent investigator to inspect Hudson’s health care policies and practices, developing recommendations to improve the quality of care at the facility, and overseeing the implementation of those recommendations.”

‘Unsanitary conditions’
A 2012 Detention Watch report on broader issues at detention facilities around the country found similar complaints, adding that detainees lack access to nutritional food, exercise, and clean clothing, despite federal rules requiring that detainees be provided all three. Hudson officials did not respond to requests for comment, but a press release announcing its review into Espinoza’s death said that the jail has been accredited by the National Commission of Correctional Health Care and that the Velazquez panel “did not substantiate the charges that detainees were deprived of adequate medical care.”
http://www.njspotlight.com/stories/17/08/14/renewed-calls-for-independent-monitor-after-2-deaths-at-hudson-county-jail
Male officers strip searched me, put me in jail with men, woman says in suit
Sep 21, 2017 at 07:04 PM EDT
A former New Jersey woman with a rare disorder is suing the county jail over claims that she was placed in a cell wearing only a hospital gown in the men's wing of the facility overnight where a corrections officer allegedly ordered her to bend over, spread her legs and laughed. The woman, who lived in Somerset at the time, filed the lawsuit in Middlesex County Superior Court last month alleging her civil rights were violated and assault and battery.
Middlesex County officials declined to comment on pending litigation. According to her attorney, K. Raja Bhattacharya, the woman, who has Type 1 diabetes, was taken to the jail's psychiatrist's office following a panic attack over her low blood sugar, according to the lawsuit.

When the woman was brought back to the female wing of the jail in a medical patient gown, she claims in a statement through her attorney that she was strip searched by a woman officer who told her she was a man and had a penis. The woman, who suffers from a rare disorder, Congenital Generalized Lipodystrophy, said she was then forced to disrobe in front of men in the jail and strip searched again by male officers, according to the lawsuit.

https://articles.nj.com/middlesex/index.ssf/2017/09/male_officers_strip_searched_me_put_me_in_jail_wit.amp
Bergen County Jail

Bergen County Jail housing Female Immigrant Detainees for the First Time

Monsy Alvarado, Staff Writer, June 3, 2017

The Bergen County Jail has begun for the first time to house women immigrant detainees for the federal government, leading advocates to question whether the facility is set up for the new female population.

About a dozen women were sent to the jail on River Street by Immigration and Customs Enforcement last month, said William Schievella, director of communications for the Bergen County Sheriff's Office. He said the change does not violate the agreement between the Bergen County Jail and the federal government.

The move worries Sally Pillay, program director for First Friends of New Jersey & New York, which organizes volunteers to visit immigrant detainees being held at facilities in both states. Pillay raised concerns about whether the woman's needs will be met at the jail. Some of the women, who are in the country without legal status, are participants of the visiting program, she said, and were being held at the Hudson County Jail last week before their transfer. A spokesperson for Immigration and Customs Enforcement's New York Field Office did not return calls last week. The Bergen County Jail, which has 1,200 beds, houses immigrant detainees whose cases are handled by the Varick Street Immigration Court.

The federal government pays Bergen County $110 a day per detainee. Last year, the Bergen County Sheriff's Office was paid $6.9 million to house ICE detainees, said Schievella.

The agreement to house immigrant detainees dates back at least 20 years. Through the years, the number of detainees awaiting deportation for immigration violations and housed in Bergen County has grown, recently to more than 240 on some days.

Two Somerset County Jail guards are facing charges after one allegedly punched an inmate and another helped cover up the incident, according to a report.

Roger Ridley, 43, was arrested Sept. 18 on charges of false swearing, and Robert Smiegoski, 49, was arrested Sept. 15 on charges of tampering with witnesses and informants. Both have applied to enter a pre-trial intervention program.

In July, Ridley reportedly told detectives at the Somerset County Prosecutor's Office about an altercation on May 17 between an inmate at the jail and Ridley, but said he "did not know" how the inmate received an injury to his eye and face, and denied hitting him, according to the report. It is not known if either will face charges for the alleged altercation.

On Aug, 24, Ridley reportedly provided another statement to detectives clarifying that the "prior sworn statement was false and that he did in face hit the inmate" on May 17, according to mycentraljersey.com.

Smiegoski also reportedly gave a statement in July that he instructed a corrections officer at the jail to write up an incident report with "false information" before reviewing and initialing the report as a supervisor "knowing that the information contained therein was false,"

A Mercer County inmate is suing the county, the corrections center and two corrections officers after they allegedly beat him while he was in handcuffs. This civil suit comes after the two officers in question Isaac Wood III, and Trachell Syphax were indicted earlier this year for attacking Rafael Jardines in May 2016. According to the lawsuit, Wood punched Jardines in the face and then kicked him multiple times in the head and body. Syphax allegedly witnessed the assault and didn't intervene. The two were engaged at the time of the incident and have since married.

The pair then allegedly filed false police reports regarding Wood's use of force. As a result of the assault, Jardines suffered serious and permanent injury to his head, neck, face, sternum, ribs, and internal organs.

The suit, filed by lawyers Robin Lord and Clifford Bidlingmaier, also claims that the county and the Mercer County Correction Center was aware of Wood's tendency to use excessive force, and they failed to properly discipline him. The six-count suit says Jardines suffered a violation of civil rights, assault and battery, indifference to medical needs, and neglect. He is seeking compensatory and punitive damages and attorney's fees.

3 corrections officers charged for alleged roles in jail suicides

Three Cumberland County corrections officers are facing criminal charges in connection with two different suicide deaths that happened at the Cumberland County Jail in 2017. A grand jury indicted 31-year old Tabatha Roman of Vineland with third-degree endangering another person while charges were filed against 27-year-old Nicolas Gomez of Millville and 40-year-old Justin Cimino of Vineland. Both were charged with third-degree tampering with public records and third-degree endangering another person.

Within the past two years, a total of at least six suicides have happened in the jail. The county is currently being sued as a result of the deaths. The county has created plans to make a new jail that is anticipated to open in 2020.

Cimino, Gomez and Roman have all been suspended without pay and are awaiting court dates.

The California Medical Board has accused a doctor who provided care at the Fresno County Jail with repeated negligent acts, including denying a wheelchair to an inmate who could not walk. The medical board investigation found Dr. Michelle A. Thomas negligent in the care of five patients she saw at the jail in 2014 and 2015. If the accusations are upheld, the board could reprimand Thomas, place her on probation or revoke her medical license.

In one case, Thomas is accused of deciding that an inmate could use a walker instead of a wheelchair. The board said she ordered the chair removed on July 25, 2014, before a physical therapy examination had been done to determine if the inmate could walk using a walker, and before he had been given instructions on how to transition from a wheelchair to a walker. The wheelchair was removed on Aug. 27, 2014, the board said, and the inmate was not able to get around with the walker. He fell when he was taken from his cell for an appointment to have his eyeglasses repaired, the board said.

The alleged removal of the wheelchair cited by the medical board occurred about a month after Fresno County, under fire in 2013 over the health care for inmates and the target of a federal lawsuit, turned jail medical services over to Corizon, a Tennessee-based inmate medical services company. The county had been accused of improperly diagnosing and meeting medical and psychiatric needs of jail inmates, which was chronicled in August 2013 by The Fresno Bee in its “Locked in Terror” watchdog report.

Harbin said Corizon cannot comment on the specific board findings, but will monitor the case. However, she said: “We provide health care services to an extremely litigious patient population and as such find it necessary to review litigation, grievances or complaints on a case-by-case basis.” Corizon also is confident Thomas will be exonerated, she said.

The medical board accusation against Thomas also includes alleged negligence in the care of a patient identified only as K.C., who could not swallow food or water and who had a gastric feeding tube that allowed him to be fed liquids directly into his stomach. According to the accusation, the tract on the inmate’s feeding tube split and contents of his stomach spilled out. The inmate vomited and was in pain, the board said. A nurse told Thomas
about the opening in the tube and Thomas told the nurse that the tube should be taped shut, the board said. The nurse taped the opening and told another nurse to use a catheter to change the tube. The right size catheter could not be found and the tube was not replaced. An on-call doctor had the inmate taken to a hospital to have the tube replaced, the board said. Thomas’ order to have the nurse to attempt to change the tube was an extreme departure from the standard of care, the board said.

Three of the patients Thomas saw in the jail were women who were pregnant.

In one case, the medical board said a nurse practitioner noted that an inmate, identified as C.S., had a history of high-risk pregnancy and blood clots. Thomas did not see the inmate when she was seen for the first time in the jail on March 24, 2015, and instead the inmate was seen by a nurse practitioner. The inmate was referred to an obstetrician outside of the jail, and the nurse practitioner continued to follow the inmate until she was released on May 20, 2015. The nurse practitioner made medication orders, ordered laboratory test and gave other care. Thomas did not sign any notes or orders, the board said.

Female inmates voice concerns about jail

A group of female inmates at the Maury County Jail have voiced concerns of overcrowding and discrimination in the facility. In a handwritten letter sent to the The Daily Herald, a group of inmates incarcerated in Pod 324 said nine of them have been sleeping on the floor due to overcrowding. The women also emphasized they have fewer work opportunities than male counterparts and fewer classes available, with limited spots.

“We have asked several times to work in the kitchen, but the company won’t allow women to work in the kitchen; this is discrimination against us women,” the letter read. “The men have
every job available, even going on the outside to work. The women would like the opportunity to
go outside and work also.” The group also shared issues with their pod’s facilities, including
leaking toilets and flooding from its three showers.

The inmates use a squeegee to keep the floor dry. “It has a foul smell,” the letter described.
“We constantly have to ask for the cleaning cart to clean up our pod, and half the time, we don’t
have the proper cleaning supplies to clean with.” Maury County Sheriff Bucky Rowland
responded to the the inmate’s concerns, citing longstanding factors out of his department’s
control and highlighting rehabilitation opportunities he said are available to all of those
incarcerated at the Maury County Jail. “No one is being discriminated against in the Maury
County jail,” Rowland said. He said overcrowding has been a longstanding subject. According
to the sheriff, the Maury County jail has grown from a facility of 75 inmates to 450, in a structure
designed to house 386 beds over the past 30 years.

Rowland said the crux lies in a national increase in prison populations across the United States.
He said that half of the inmates incarcerated in the Maury County jail are felons the state is
unable to house due to overcrowding in its own facilities. “If TDOC would come and pick their
prisoners up, that would take care of us,” Rowland said. “But that is not going to happen, and
we are going to continue.”

Concerning facilities, Rowland said the pod is located in the oldest section of the jail, and the
aging facility was not of the best design. “It was a poor design, and it something that has been
battled since the jail was occupied,” Rowland said. “We do as much as we can to make sure it is
a clean area. We try to keep up and are going to continue to try and battle those problems.
When we make repairs, we want to make sure it is not a Band-Aid or quick fix.”

Moving forward, Rowland said he wants to take steps for the jail to become more self-sufficient,
including constructing greenhouses and that will be used to grow food for the prisoners. “I want
them to be able to pay their own way,” Rowland said. “Jail is not supposed to be easy and fun. I
want every hand in here to be creating something positive every day. We want to do everything
we can to help our inmates transition. “We are going to do everything we can for these folks to
give them the tools that will help their success rate to go up not to repeat offend,” he added.
In Conclusion

Our jails, in our communities, are where Mass Incarceration starts. If we do not correct the issues that are documented above, through community oversight, through holding people accountable, criminally if necessary, for assaults and deaths of individuals in our County Jails, we will never end the problem.

To be very clear, the MAJORITY of individuals detained in a county facility have not yet been convicted of any crime. Most are awaiting their day in court. There is a belief stated in the United States that we are “Innocent until proven Guilty” However, the reality is that many community members, most corrections officers, and sadly many court staffs, lawyers, and public defenders act as if (and often believe) that the person is guilty based solely on an accusation.

This is NOT the way the judicial system was designed to work. Nobody should pay with the loss of their job, their home, their children, their family, and ultimately in the worst cases, their lives for being Accused of a crime.

We MUST do better in upholding the law, as well as human decency and dignity in our jails. Any one of us, on any given day, could end up detained in a jail. Even if only for a few hours, there should never be a question of the person's' health, safety, or security when this happens. Families should not have to call to make sure that their loved one is safe, healthy, and alive. Families and friends should also not have to go broke just to stay in contact with their loved ones.

The bottom line is that our county jails should be places that house those who are awaiting their day in court. Every person in the United States is entitled to that day. We must do better in every way in keeping our brothers and sisters safe, and ensuring they get that day in court in a safe, speedy, and healthy manner. It is up to each of us to ensure that happens.

Lydia Thornton
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