



New York City Board of Correction Monitoring COVID-19 Responses in New York City Jails, April 19 – April 30, 2020

June 8, 2020

Overview

This report presents observational data collected by Board staff using remote access to the Department of Correction's (the Department, DOC) Genetec security video footage system¹ to monitor: (1) Social Distancing, (2) Use of PPE Among Staff, (3) Use of Masks Among People in Custody, (4) Phone Access and Cleaning, and (5) DOC Rounding Practices (in cell units). Board staff observed housing areas used for Confirmed COVID-19 Patients, Symptomatic Individuals, and Likely Exposed but Asymptomatic Individuals (quarantined areas). This report does not include data on all of the Department and CHS' [strategies](#) to prevent the spread of COVID-19 in the jails.²

This is the Board's second report using Genetec to monitor the Department's COVID-19 response. The Board [published its first report](#) on May 11, covering observations between April 5 and April 16, 2020. It is important to note that the Department would not have had the opportunity to implement the Board's May 11th recommendations during the period covered in this report, April 19th through April 30th, 2020. It is also important to note that the sample of housing areas observed is not intended to be statistically representative, and comparisons between this reporting period and the previous reporting period represent differences between the two samples, not statistically generalizable trends.

The findings in this report related to social distancing are similar to those in the Board's prior report with no notable improvement or worsening in housing areas observed. Board staff observed a higher percentage of staff wearing masks correctly and a slightly lower percentage of people in custody wearing masks correctly.

*We acknowledge and thank Board staff, including Dilcio Acosta, Joshua Acquaye, Bart Baily, Kate Horton, Christin Johnson, Jemarley McFarlane, and Kate McMahan for their contributions to this report.

¹ The Department has approximately 14,000 wall-mounted video surveillance cameras Department-wide.

Eighth Report of the Nunez Independent Monitor at 119, available at https://www1.nyc.gov/assets/doc/downloads/pdf/8th_Monitor_Report.pdf#page=119.

² For example, on May 29th, DOC reported to the Board that the Department has posted approximately 14,000 posters advising of health and policy guidelines related to the pandemic, many of which have been translated into the ten most common languages spoken in NYC.

Phone sanitation findings were also similar to the prior reporting period. Board staff observed more consistent staff rounding in celled units than in the prior reporting period.

While the Department and CHS have taken major steps to respond to the COVID-19 pandemic, the findings in this report continue to highlight the immense structural challenges to protecting both people in custody and staff from the spread of COVID-19 in correctional settings.

Summary of Findings

Focus Area	DOC Commitment	Key Findings	Comparison to Previous Reporting Period
Social Distancing	The Department states that housing areas operating below 50% capacity have the space to safely implement social distancing practices, such as alternate bed spacing.	Board staff observed people in custody not practicing social distancing, as they were sitting or standing close together in communal spaces such as dayrooms, especially around TV sets, phones, main doors, and during meals.	Across all social distancing metrics, the findings in this report are similar to those in the Board’s prior report.
		In 57% (n=12) of the 21 celled areas and 50% (n=8) of the dorm areas housing likely exposed but asymptomatic individuals Board staff observed people in custody not practicing social distancing.	
		Board staff observations did not find social distancing issues in areas housing symptomatic or confirmed COVID-19 patients, which each had a low census (see page 8).	
		Board staff monitored density in dorm areas to identify areas under 50% capacity where alternate bed spacing was possible; of 16 audited dorm areas for likely exposed but asymptomatic individuals, 31% (n=5) were above 50% capacity and 69% (n=11) were below 50% capacity. ³	

³ NYC Department of Correction Social Distancing Guidelines for Staff and People in Custody: <https://www1.nyc.gov/site/doc/media/socialdistancing.page> (Accessed May 1, 2020). As of May 28, 2020, 68% (n=20) of open dorm units were below 50% capacity.

		<p>Board staff found alternate bed spacing to be consistent in 82% (n=9) of the eleven (11) dorm areas that were operating below 50% capacity (see page 9)</p>	
<p>Mask Use (Staff)</p>	<p>On April 3, 2020 DOC released a teletype stating that staff shall wear masks at all times while on duty, regardless of post.</p>	<p>Of the 686 staff that Board staff observed across the two weeks, 91% (n=621) were wearing masks correctly (meaning the mask covered the staff member's nose and mouth). Correct staff mask usage decreased from 92% (n=308) in week one of the audit period to 89% (n=313) in week two (see page 9).</p> <p>Staff mask use was consistent (meaning <i>all</i> staff visible on the unit were wearing masks correctly) in 53% (n=33) of the 62 housing area audits, constant across the two audit weeks. This is comparable to 54% (n=39) of units observed in the previous reporting period (see page 10).</p>	<p>Board staff observed a slightly higher percentage of staff wearing masks correctly than in the prior reporting period.</p>
<p>Mask Use (People in Custody)</p>	<p>On April 3, 2020 DOC released a teletype stating that people in custody shall wear masks while in communal areas.</p>	<p>In 14% (n=62) of 440 observations all visible people in custody were correctly wearing masks. In 34% (n=151) of observations some visible people in custody were correctly wearing masks, and in 52% (n=227) of observations none of the visible people in custody were correctly wearing masks (see page 10).</p>	<p>Board staff observed a slightly lower percentage of people in custody wearing masks correctly than in the previous reporting period.</p>
<p>Phone Access and Cleaning</p>	<p>On March 18, 2020, DOC suspended all in-person visiting and has committed to allowing increased phone access to all people in custody, and cleaning and sanitizing all</p>	<p>Across 45 instances of phone use observed, the phone was cleaned before use three (3) times. On each of these three occasions the person in custody appeared to wipe the phone with a cloth or sponge. Board staff observed buckets of water positioned near phones in some⁴ housing areas, unlike in previous audit periods where no sanitation</p>	<p>Phone sanitation findings were similar to the previous reporting period.</p>

⁴During the reporting period covered in this report (April 19-30), Board staff conducting observations via Genetec started to observe sanitation buckets in common areas near phones. Board staff will develop a metric to monitor the availability or sanitation buckets and/or sanitation wipes in future reports. During on-site inspections in May Board staff observed buckets which contained Virex cleaning solution in common areas near phones. The Department has confirmed that the Virex solution procured by the Department can be used as a COVID-19 disinfectant. On May 29th the Department reported to the Board that it had started providing sanitation wipes to clean phones in housing areas.

contact surfaces and phones every 2 hours.

supplies were visible within the vicinity of phones. Where sanitation supplies were not visible Board staff were unable to confirm whether they were available elsewhere on-site for use by people in custody. Board staff frequently observed people in custody using socks or other fabric to cover phones during use (see page 11).

DOC Rounding

DOC's Directive "Housing Area Logbooks" states that officers posted within non-disciplinary celled housing areas shall conduct active supervision tours every 30 minutes during times that people in custody are confined to their cells.

Board staff observed the required two rounds within a one-hour period in 91% (n=43) of the 47 distinct hours observed in celled housing units (see page 12).

Board staff observed more consistent staff rounding in celled units than in the prior reporting period.

Recommendations

Correctional Health Services and the Department of Correction should work with the Department of Health and Mental Hygiene to develop and implement a new public health campaign to communicate health risks and what actions people in custody and staff can take to protect their health and the health of those around them.

- a. The campaign should address the recommendations made in the Board's May 11th COVID-19 monitoring report and share written protocols for:
 - i. the management of COVID-19 housing areas;
 - ii. social distancing, and
 - iii. how housing areas and phones are to be sanitized and by whom.

To build trust, the agencies should report on compliance with established protocols.

- b. The campaign should be linked to functioning and accessible services, be transparent, timely, easy-to-understand, acknowledge uncertainty, address affected populations, and be disseminated using multiple platforms, methods and channels.⁵
- c. The campaign should engage affected communities in development of effective tools and employ credible messengers to deliver communications.
- d. The campaign should recognize the unique risks of the jail setting and provide jail-specific public health recommendations.

⁵ See World Health Organization guidance available at <https://apps.who.int/iris/bitstream/handle/10665/259807/9789241550208-eng.pdf;jsessionid=4E80D83881473B92096A90C4E7C8468A?sequence=2#page=15>

Methodology and Limitations

The Department, with guidance from CHS, has been housing people according to COVID-19 diagnosis, symptoms, and potential exposure and has publicly committed to taking a number of precautions to prevent the spread of Covid-19 in NYC jails including: implementing strategies to promote social distancing (such as the use of alternate bed spacing in dorm areas and permitting fewer people at a time in day rooms and congregate areas), providing Personal Protective Equipment (PPE) and masks for all who work or are confined in DOC facilities, and ensuring the availability of sanitation supplies and increasing the frequency of sanitation.

To monitor these strategies, over the two-week audit period, Board staff conducted a total of 62 audits of 50 unique housing areas (see Table 1). Board staff employed purposive sampling aiming for even distribution across facilities and weighted according to the number of open units in each COVID-designated housing category on each day audited (for example, more units sampled from asymptomatic and exposed units because there were more of them on a given audit day), with as little repetition in housing areas audited as possible. While housing areas were selected to be reflective of the Department's COVID-19 housing categories, the sample is not intended to be statistically representative, and these observational findings are not generalizable beyond the housing areas that were observed. Board staff did not observe an identical sample of areas to the previous report, and comparisons between this reporting period and the previous reporting period represent differences between the two samples, not statistically generalizable trends.

Per guidance from the Mayor and the Department of Health and Mental Hygiene, Board staff have been working remotely since mid-March. Given the Board's decision to limit its staff's in-person access to the jails for the safety of staff and people in custody, Board staff collected data via remote access to the Department's Genetec security footage and were limited to information that was observable and capable of remote verification through this system. Genetec is in DOC facilities as a security tool, and has never been intended for systematic monitoring or auditing activities in housing areas. As such, monitoring via Genetec presents several notable limitations, including camera angles not designed for monitoring these metrics, a lack of audio, blind spots, and intermittent loss of coverage or remote connection.

Where formal written policies have not yet been memorialized, Board staff developed metrics based on DOC's public statements or information provided in updates to Board leadership. Every effort was made to develop a structured, replicable approach to observations. Detailed supporting documentation of Board staff's observations by date and housing area has been shared with the Department.

Table 1: Number and Type of Housing Areas Audited April 19-April 30, 2020

Housing Type	Week 1 April 19-April 23, 2020		Week 2 April 26-April 30, 2020		Total		Average Daily Number of Open Housing Areas Reported by DOC During Reporting Period
	Number of unique Housing Areas Audited	Number of Audits	Number of unique Housing Areas Audited	Number of Audits	Number of unique Housing Areas Audited	Number of Audits	
Confirmed COVID-19 Cells	0	0	0	0	0	0	15
Confirmed COVID-19 Dorm	7	7	5	5	7	12	
Confirmed COVID-19 and Symptomatic Cells	3	3	4	4	5	7	20
Symptomatic Cells	3	3	3	3	4	6	12
Symptomatic Dorms	0	0	0	0	0	0	
Likely Exposed but Asymptomatic Cells	11	11	9	10	20	21	85
Likely Exposed but Asymptomatic Dorms	6	6	9	10	14	16	
Total	30	30	30	32	50	62	-

Findings

Social Distancing

Board staff observed footage in the sample of housing areas for extended periods, including each hour on the hour⁶ from 10 am to 6 pm (a total of at least 9 points in time),⁷ Board staff monitored social distancing practices and crowding in communal areas, noting whether they did or did not observe staff and people in custody practicing social distancing. Examples of not practicing social distancing include people crowded or grouped within 6 feet of one another for prolonged periods (rather than just in passing).

Board staff observed people in custody not practicing social distancing, as they were sitting or standing close together in communal spaces such as dayrooms, especially around TV sets, phones, main doors, and during meals.

In 57% (n=12) of the 21 celled areas housing likely exposed but asymptomatic individuals, and 50% (n=8) of the dorm areas housing likely exposed but asymptomatic individuals, Board staff noted individuals not practicing social distancing, such as standing or sitting in crowds or groups, less than six feet apart, for prolonged periods.

Board staff did not identify social distancing issues in areas housing symptomatic or confirmed COVID-19 patients, which all had a low census.

HOUSING DENSITY reflects the percentage of available beds in a unit that are occupied. Lower housing density (fewer occupied beds) allows for greater social distancing, as fewer people are sharing communal spaces. The Department states that most dorm housing areas are operating below 50% capacity,⁸ affording people the opportunity to more easily practice social distancing precautions. Capacity below 50% in dorm areas allows for alternate bed spacing.

ALTERNATE BED SPACING means leaving every other bed empty to allow for greater distance between occupied beds. The Department publicly committed to implementing alternate bed spacing where possible in dorm housing areas in its COVID-19 presentation at the March 10, 2020 public Board meeting and in its plan posted on the DOC website.⁹

Board staff used DOC data reported daily to the Board¹⁰ to calculate the percentage of occupied beds in audited areas housing symptomatic individuals or likely exposed but asymptomatic individuals.¹¹ Board staff

⁶ If there was no activity on the unit on the hour, Board staff reviewed footage within 15 minutes of the hour to identify the presence of individuals on the unit.

⁷ Board staff identified social distancing issues through hourly observations of DOC and extended periods in between to monitor DOC-initiated strategies to promote social distancing such as limiting communal areas to certain numbers of people.

⁸ NYC Department of Correction Social Distancing Guidelines for Staff and People in Custody:

<https://www1.nyc.gov/site/doc/media/socialdistancing.page> (Accessed May 1, 2020). As of May 28, 2020, 68% (n=20) of open dorm units were below 50% capacity.

⁹ Social Distancing Guidelines for Staff and People in Custody. NYC Department of Correction.

<https://www1.nyc.gov/site/doc/media/socialdistancing.page> (Accessed May 1, 2020).

¹⁰ DOC Inmates in Custody File, which is an automated pull from the DOC Inmate Information System (IIS) at 11:00 am; data on Sundays (April 5 and April 12) were from DOC's Daily 5am Census.

¹¹ Density was not calculated for areas housing only confirmed COVID-19 patients as they have already tested positive.

documented housing density in dorm areas to determine in which areas alternate bed spacing was possible. In those housing areas, Board staff observed footage at a single point in time during evening lock-in hours (9 pm - 5 am)¹² when all or most people in custody were in their beds, to ascertain whether alternate bed spacing was being used consistently, inconsistently, or not at all.

Board staff monitored density in dorm areas for the purposed of identifying areas under 50% capacity where alternate bed spacing was possible; of 16 audited dorm areas for likely exposed but asymptomatic individuals, 31% (n=5) were above 50% capacity and 69% (n=11) were below 50% capacity.¹³

Board staff found alternate be spacing to be consistent in 82% (n=9) of the eleven (11) dorm areas that were operating below 50% capacity,¹⁴ similar to 80% (n=8) in the previous reporting period.

Mask Use Among Staff

On April 3, 2020 DOC released a Teletype stating that staff shall wear masks at all times while on duty, regardless of post.¹⁵ The Department reports that all staff are provided masks and replacement masks are available, as necessary.

To monitor mask use among staff, Board staff checked footage each hour on the hour¹⁶ from 10 am to 6 pm (a total of 9 points in time) to count the number of visible staff in the housing area, and the number of those staff who were correctly wearing masks.¹⁷

Of the 686 staff¹⁸ that Board staff observed across the two weeks, 91% (n=621) were wearing masks correctly (meaning the mask covered the staff member's nose and mouth). Correct staff mask usage was slightly higher in of the first week of the audit period (92%, n=308) compared to the second week of the audit period (89%, n=313). Board staff observed a higher percentage of staff wearing masks correctly (91%, n=621) in this reporting period than in the prior reporting period, where 86% (n=813) of observed staff were wearing masks correctly.

Staff mask use was consistent (meaning all staff visible on the unit were wearing masks correctly) in 53% (n=33) of the 62 housing area audits, constant across the two audit weeks. This was similar to 54% (n=39) in the previous reporting period.

¹² DOC Directive 4009R-B "Lock-In/Lock-out" at 2.

¹³ The Board is not reporting this metric as a reflection of housing density in general, but to identify which housing areas could implement alternate bed spacing.

¹⁴ Consistent alternate bed spacing is not possible when capacity is over 50% and was therefore not audited in the nine (9) dorm areas housing symptomatic or likely exposed but asymptomatic individuals that were over 50% capacity.

¹⁵ DOC Teletype HQ-01008-0 (April 3, 2020).

¹⁶ If there was no activity on the unit on the hour, Board staff reviewed footage within 15 minutes of the hour to identify the presence of individuals on the unit.

¹⁷ Board staff used discretion when documenting staff who were not wearing masks, recognizing that DOC staff may momentarily need to adjust or remove masks for various reasons and did not document these instances as staff "without mask."

¹⁸ This does not represent the number of unique staff, as the same staff members may have been counted at multiple points throughout the day.

Staff mask use was highest in areas housing symptomatic individuals, where 98% (n=56) of the 57 staff observed were wearing masks correctly. Eighty-three percent (83%, n=5) of the 6 housing areas for confirmed COVID-19 patients had 100% correct staff mask use.

Staff mask use was lowest in housing areas for likely exposed but asymptomatic individuals, where 88% (n=347) of the 394 observed staff were wearing masks correctly and 42% (n=15) of 36¹⁹ housing areas had 100% correct staff mask use.

Mask Use Among People in Custody

On April 3, 2020 DOC released a teletype stating that people in custody shall wear masks while in communal areas.²⁰ The Department reports that all people in custody have been provided masks and replacement masks are available, as necessary. The Board acknowledges that while the Department can provide masks and encourage their use, it is up to the discretion of people in custody to wear masks. Board staff are unable to monitor the availability of masks using Genetec.

Board staff sought to observe mask use among people in custody from April 12-April 16 (the second week of the audit period). Board staff used the Genetec system to view the entire housing area each hour on the hour from 10am-6pm for each audit date. At each point in time Board staff documented whether they observed people in custody in any communal areas in the unit and whether: every visible person in custody was wearing a mask correctly (covering their nose and mouth), some of the visible people in custody in the housing area were wearing masks correctly, or none of the visible people in custody in the housing area were wearing masks correctly.

Board staff conducted 440 unique observations of people in custody across all housing types. In 14% (n=62) of observations all visible people in custody were correctly wearing masks. This was lower than the previous reporting period, where in 17% (n=42) of observations all visible people in custody were wearing masks.²¹ In 34% (n=151) of observations some visible people in custody were correctly wearing masks, and in 52% (n=227) of observations none of the visible people in custody were correctly wearing masks.

Mask use was lowest in housing areas for likely exposed but asymptomatic individuals, where 63% (n=178) of 284 observations showed no people in custody wearing masks correctly, and highest in housing areas for symptomatic individuals, where only 5% (n=1) of the 20 observations show no people in custody wearing masks correctly. Mask use among people in custody was inconsistent across all housing units with shared communal areas.²²

Board staff continued to observe multiple instances of people in custody wearing masks incorrectly, for example, on their chins.

¹⁹ In one housing area no staff were observed in the housing at the observed time points during the observation period.

²⁰ DOC Teletype HQ-01008-0 (April 3, 2020).

²¹ Mask use among people in custody was only measured in the second week of the previous reporting period.

²² In contagious disease units used to house confirmed COVID-19 patients and symptomatic individuals a total of three people in custody were observed out of their cells in the entire audit week, all of whom were wearing masks.

Phone Access and Cleaning

On March 18, 2020, DOC suspended all in-person visiting and has committed to allowing increased phone access to all people in custody.²³ DOC also committed publicly to cleaning and sanitizing all contact surfaces and phones every 2 hours.²⁴

The CDC recommends²⁵ high-touch surfaces including phones should be cleaned and disinfected several times per day.

Board staff used Genetec to observe a single instance of phone use in each housing area during the entire 24-hour period of the audit date to verify phone access in the housing area. Board staff monitored each unit audited until at least one instance of phone use was observed, and Board staff then noted whether the phone was cleaned before or after use.²⁶

Across 45 instances of phone use observed, the phone was cleaned before use three (3) times. On each of these three occasions the person in custody appeared to wipe the phone with a cloth or sponge. This was similar to the previous reporting period, where the phone was cleaned in three (3) of the 45 observed instances of phone use.

Board staff observed buckets of water positioned near phones in some²⁷ housing areas, unlike in previous audit periods where no sanitation supplies were visible within the vicinity of phones. Where sanitation supplies were not visible Board staff were unable to confirm whether they were available elsewhere on-site for use by people in custody.

Board staff frequently observed people in custody using socks or other fabric to cover phones during use.

²³ People in custody are permitted 21 minutes of phone time every 3 hours. All phone calls are free.

²⁴ New York City Department of Correction: COVID19 Preparation & Action Plan <https://www1.nyc.gov/site/doc/media/cleaningandprevention.page> (Accessed May 1, 2020).

²⁵ Centers for Disease Control and Prevention Interim Guidance on Management of Coronavirus Disease (COVID-19) in Correctional and Detention Facilities (p.9) <https://www.cdc.gov/coronavirus/2019-ncov/downloads/guidance-correctional-detention.pdf>

²⁶ This metric is limited by the use of Genetec for observations; Board staff are unable to confirm the frequency of phone cleaning throughout the course of any one day using Genetec footage.

²⁷ During the reporting period covered in this report (April 19-30), Board staff conducting observations via Genetec started to observe sanitation buckets in common areas near phones. Board staff will develop a metric to monitor the availability or sanitation buckets and/or sanitation wipes in future reports. During on-site inspections in May Board staff observed buckets which contained Virex 256 cleaning solution in common areas near phones. The Department has confirmed that the Virex solution procured by the Department can be used as a COVID-19 disinfectant. On May 29th the Department reported to the Board that it was providing alcohol wipes to clean phones in housing areas.

DOC Rounding in Cell Housing

DOC's Directive "Housing Area Logbooks" states that officers posted within non-disciplinary celled housing areas shall conduct active supervision tours every 30 minutes during times that people in custody are confined to their cells. Active supervision requires visual observations of each person in custody for signs of life and checking that each cell is secured.²⁸

Board staff monitored rounding in cell housing areas due to the increase in people who are actively unwell or symptomatic and therefore at increased risk of deterioration, as well as potential increases in time spent in cells to increase social distancing. In regular celled housing areas for symptomatic individuals or likely exposed but asymptomatic individuals, BOC staff observed Genetec footage for a single hour during the night to confirm whether DOC staff rounded twice within that hour.²⁹ In contagious disease units housing both confirmed COVID-19 patients and symptomatic individuals Board staff observed footage for a single hour on each tour (morning, afternoon, and night) as people in custody generally remain in their cells for 24 hours a day.

Board staff observed the required two rounds within a one-hour period in 91% (n=43) of the 47 distinct hours observed in celled housing units. This was higher than the previous reporting period, where Board staff observed the required two rounds within a one-hour period in 80% (n=39) of hours observed.

Rounding was most consistent in the contagious disease units (for confirmed COVID-19 patients and symptomatic individuals), where Board staff observed rounding twice within all the of 21 single hours observed.

²⁸ DOC Directive 4514R-C "Housing Area Logbooks" at 4.

²⁹ Board staff focused on celled housing with confirmed COVID cases and symptomatic individuals as those areas house people who are actively unwell and symptomatic and therefore at increased risk of deterioration. Officers are required to round in all housing areas every 30 minutes where individuals are locked in cells per DOC Directive 4514R-C "Housing Area Logbooks" at 4.