NYC Board of Correction
Lockdowns Report

Introduction
Department of Correction (DOC or the Department) policy permits staff to lockdown housing areas and facilities to investigate violent incidents, avoid serious violent incidents, conduct searches for contraband, or restore order. During a lockdown, people in custody must be in their cell and all movement, services, and programming cease. Despite a 32% decrease in the DOC average daily population (ADP) since 2008, there has been an 88% increase in lockdowns.

The Board of Correction (BOC or the Board) monitors the length of lockdowns and their impact on programs and services mandated by Minimum Standards including access to health and mental health services. Lockdowns hinder DOC’s and Correctional Health Services’ ability to meet the Minimum Standards. As a security response that impacts a large number of people and services, lockdowns also contribute to perceptions of unfair and excessive punishment, frustrations, and tensions in the facilities. BOC staff reviewed DOC’s Monthly Security Statistical Reports (MSR) from January 2008 through November 2017, and 24-Hour Central Operations Desk (COD) reports from January 2016 to November 2017.

Key Findings
- There was an 88% increase in lockdowns since 2008.
- From 2016 to 2017 there was a 32% increase in the total number of lockdowns (facility and housing area).
- In 2017, there was a total of 2,386 lockdowns. Eighteen percent (18%) of lockdowns were facility-wide lockdowns, and 82% affected one or more housing areas.
- The Otis Bantum Correctional Center (OBCC) was the facility with the most lockdowns in both 2016 and 2017. In 2017, 21% of all lockdowns occurred in OBCC.
- Four facilities more than doubled their number of lockdowns from 2016 to 2017 (West, RNDC, OBCC, and BKDC).
- Uses of force (36%), inmate tension (21%), and inmate-on-inmate fights (18%) were the top three reasons for lockdowns in DOC facilities in 2017.
- Per incident, lockdowns affected an average of 30 people in ESH Level 1, 40 people in ESH Level 2, 16 people in ESH Level 3, seven people in Secure, and 171 in the general population when they occurred in these housing categories.

2 NEW YORK CITY DEP’T OF CORRECTION, MONTHLY SECURITY STATISTICAL REPORTS – JANUARY 2008-NOVEMBER 2017 (on file).
3 For example, see BOC’s November 2, 2016 and September 12, 2016 Notices of Violation.
4 Breakdown of facility-wide and housing area lockdowns are calculated from 24-Hour reports and do not equal the total number of lockdowns reported in the Monthly Security Reports (2,433) for the same time period. Board staff coded 47 fewer lockdowns than the Department reports in the MSR because, upon review, the reported incidents were not actual lockdown events. The combined total of facility and housing area lockdowns as coded from the 24-Hour COD report was determined to be 2,386 lockdowns.
Lockdowns Reported by DOC
A historic review of lockdowns reported in the Department’s Monthly Security Reports from 2008 to 2017 found the annual number of lockdowns reported hit a peak in 2013 with 3,577 lockdowns reported. The number of lockdowns reported sharply decreased in 2014 with only 1,243 lockdowns reported and then steadily increased each year since 2014. The total number of lockdowns increased by 96% between 2014 and 2017.

Most recently, from 2016 to 2017, there was a 32% increase in total lockdowns from 1,849 lockdowns in 2016 to 2,433 lockdowns in 2017 (through November). In 2017, 18% (n=424) of lockdowns were facility-wide lockdowns, and 82% (n=1,962) affected one or more housing areas.

Figure 1.

![Total Number of DOC Lockdowns January 2008 - November 2017](source)

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6 Breakdown of facility-wide and housing area lockdowns are calculated from 24-Hour reports and do not equal the total number of lockdowns reported in the Monthly Security Reports (2,433) for the same time period. Board staff coded 47 fewer lockdowns than the Department reports in the MSR because upon review the reported incidents were not actual lockdown events. The combined total of facility and housing area lockdowns as coded from the 24-Hour COD report was determined to be 2,386 lockdowns.
The Otis Bantum Correctional Center was the facility with the most lockdowns in both 2016 and 2017. Twenty-one percent (21%) of all lockdowns occurred in OBCC in 2017.

Four facilities experienced more than a 50% increase in lockdowns since 2016:
- West Facility (686% increase)\(^7\)
- Robert N. Davoren Center (RNDC) (105% increase)
- Otis Bantum Correction Center (OBCC) (95% increase)
- Brooklyn Detention Center (BKDC) (72% increase)

Figure 2.

![Total Number of Lockdowns by Facility](image)


**BOC Analysis of DOC 24-Hour Reports**

**Reasons for Lockdowns**
There were 2,386 lockdowns reported in 2017 (through November). Uses of force (36%, n=856), inmate tension (21%, n=504), and inmate-on-inmate fights (18%, n=431) were the top three reasons for lockdowns within DOC facilities in 2017.\(^8\)

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\(^7\) The West Facility had the highest increase in lockdowns: from 7 lockdowns in 2016 to 55 in 2017. In this corresponding period, the ADP in West Facility increased by 63%.

\(^8\) Data for 2017 was analyzed through November 30, 2017. There may be more than one reason associated with one lockdown incident and one incident may affect more than one housing area. Therefore, the percentages do not add up to 100%.
Impact of Lockdowns
Per incident, 2017 lockdowns affected an average of 30 people in ESH Level 1, 40 people in ESH Level 2, 16 people in ESH Level 3, seven people in Secure, and 171 in the general population when they occurred in these housing categories. As a result of these lockdowns, housing areas entitled to 14 hours of lock-out time were, on average, afforded 4% fewer hours per day than the Minimum Standards require. People in ESH 1, ESH 2, ESH 3, and Secure were afforded an average of 2.1 (30%), 2 (29%), 1.5 (15%), and 0.5 (5%) fewer hours per day respectively than that required by the Minimum Standards and Department policy. It is important to note that this analysis presents averages across the entire year. In practice, many lockdowns occur consecutively. The numbers below do not reflect the cumulative impact of consecutive lockdown incidents which will be examined in future BOC reports.

Table 1.

<table>
<thead>
<tr>
<th>Housing Category</th>
<th>Lock-Out Hours Per Day</th>
<th>Average Lock-Out Hours Afforded Per Day</th>
<th>Average Percent Fewer Hours Per Day</th>
<th>Average Number of People Affected Per Lockdown Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>ESH 1</td>
<td>7</td>
<td>4.9</td>
<td>30%</td>
<td>30</td>
</tr>
<tr>
<td>ESH 2</td>
<td>7</td>
<td>5.0</td>
<td>29%</td>
<td>40</td>
</tr>
<tr>
<td>ESH 3</td>
<td>10</td>
<td>8.5</td>
<td>15%</td>
<td>16</td>
</tr>
<tr>
<td>Secure</td>
<td>10</td>
<td>9.5</td>
<td>5%</td>
<td>7</td>
</tr>
<tr>
<td>General Population &amp; Other Housing Categories</td>
<td>14</td>
<td>13.5</td>
<td>4%</td>
<td>171</td>
</tr>
</tbody>
</table>


9 NOTE: Scheduled lock-out periods in some ESH unites alternate between upper and lower tiers. DOC records on lockdowns do not specify which tiers were scheduled to be locked out at the time of a lockdown. Therefore, the calculations above assume all individuals in a housing unit were affected by each lockdown of the unit, regardless of which tier was scheduled to be locked out at the time of the lockdown.
Lockdown Policies and Procedures
Department of Correction policies describe procedures for lock-ins and lock-outs within facilities.10 This includes a list of scheduled lock-in and lock-out times for persons in custody and a set of procedures that are triggered when an area is placed on lockdown status. The decision to lockdown a housing area or an entire facility may be initiated by the Tour Commander and must be approved by the facility’s Commanding Officer. Additional authorization from the Department Officer of the Day is required for lockdowns lasting longer than eight hours. The Chief of Department must authorize lockdowns extending beyond twenty-four hours.11 At the conclusion of a lockdown, DOC staff notifies the Central Operations Desk and fills out a form12 that documents the duration, housing area, reason, and services affected.

Lockdown Reporting Data and Methodology
The findings in this report are based on analyses of DOC’s Monthly Security Reports (MSR) from January 2008 through November 2017. The MSR does not report lockdowns by lockdown type (facility-wide or housing area) nor does the MSR include metrics related to the duration of lockdown incidents. For a more comprehensive understanding of lockdowns, Board staff reviewed each 24-Hour COD report from January 2016 to November 2017. The Department’s 24-hour COD reports include daily information on facility incidents (i.e., type, facility, incident date, and report date) and lockdown durations. Board staff coded reasons for lockdown, duration of lockdown, total census, and location as reported by DOC staff in the 24-hour COD reports. This approach allowed the Board to identify the most common reasons for lockdowns, calculate the percentage of lock-out time lost, and the average number of people affected.

Next Steps
This report provides a preliminary glimpse into lockdowns in DOC facilities. Moving forward, BOC will take a closer look at consecutive lockdowns and the duration of lockdowns, the services that are interrupted, and the Department’s policies related to tracking this information. Board staff will conduct extended observations and audit the Department’s area lock-in form13 data to track the services that are interrupted. Furthermore, the Board will work with Correctional Health Services to better understand the policies on access to care and services during lockdowns.

11 Id, at page 6.
13 Id.