



U.S. Department of Justice

Civil Rights Division

Office of the Assistant Attorney General

Washington, D.C. 20035

June 1, 1995

Mr. Daniel Bridges  
Chairman  
Harris County Board of Commissioners  
P.O. Box 365  
Hamilton, GA 31811

Re: Notice of Findings from Investigation of  
Harris County Jail

Dear Mr. Bridges:

On October 3, 1994, we notified you of our intent to investigate the Harris County Jail ("HCJ" or "Jail") pursuant to the Civil Rights of Institutionalized Persons Act ("CRIPA"), 42 U.S.C. § 1997 et seq. Consistent with the requirements of CRIPA, the purpose of this letter is to advise you of our findings from this investigation, the supporting facts, and to recommend necessary remedial measures.

Our investigation consisted of a tour of the facility with expert consultants, the examination of documents, and extensive interviews with prisoners and staff at the facility. We were accompanied on our tours by three consultants: a penologist, a medical expert, and a fire safety/environmental sanitarian, all with expertise in jail facilities. Throughout the course of this investigation, County officials and HCJ staff extended to us and our consultants their cooperation, for which we wish to convey to you our thanks.

In making our findings, we recognize that HCJ confines both pre-trial detainees and post-conviction inmates. In general, inmates may not be subjected to conditions that are incompatible with evolving standards of decency or deprive them of their basic human needs while incarcerated. See Estelle v. Gamble, 429 U.S. 97 (1976). With respect to the pre-trial detainees, the Fourteenth Amendment prohibits punishment of these persons and restrictive conditions or practices that are not reasonably related to the legitimate governmental objectives of safety, order, and security. Bell v. Wolfish, 441 U.S. 520 (1979).

CRIPA Investigation



JC-GA-007-001

For those convicted of a crime, the standard to be applied is the Eighth Amendment's proscription against cruel and unusual punishment. Wilson v. Seiter, 501 U.S. 294 (1991); Rhodes v. Chapman, 452 U.S. 337 (1981). When convicted prisoners are not, as here, separated from pre-trial detainees, the Fourteenth Amendment standard applies to all inmates.

HCJ is located in Hamilton, Georgia. It is a brand new facility, opened in April of 1993. The capacity of HCJ is 109 inmates. On the day of our tour it housed 48 inmates. While the County and sheriff are to be commended for the construction of a new jail, we regret to inform you that various other conditions at HCJ violate the constitutional rights of persons confined there.

#### I. Deficient Correctional Practices.

A. Supervision is inadequate. While HCJ recently increased its staffing to consist of two jailers on each twelve-hour shift and a third jailer that rotates on the day shift, HCJ failed to demonstrate that routine visual inspections are made in each of the housing units. Jailers observe the cell pods from a control room and seldom, if ever, enter the housing units. Observation from the control room is not complete as there are numerous blind spots. This, coupled with a design flaw that has the control room's monitoring panel facing backwards, limits adequate supervision of the inmates and poses serious risks to security. Numerous prisoners reported that they rely upon inmate trustees for necessary attention.

B. Staff training is deficient. HCJ officers reportedly have received the state's required 80 hours of basic training. However, on some shifts, we found officers on duty who had not taken the training. Moreover, HCJ fails to provide supplemental in-service training as generally accepted in the field. Supplemental training in small jail operations is needed to provide staff with the skills and knowledge necessary to effectively perform their duties and to hold staff accountable for their job performances. Without proper staff training in such matters as jail security, discipline of inmates, emergency response, medical screening, and use of CPR, unnecessary harm can occur.

C. Policies and procedures are inadequate. HCJ does not have adequate written policies or procedures. Indeed, HCJ fails to have an inmate handbook so as to inform prisoners of rules and regulations of the Jail. Written policies and procedures are important as a training tool for staff and for providing guidance to staff in the performance of their duties. A lack of specific procedures to be followed by staff to govern, e.g., inmate classification, emergencies and evacuations, escapes, inmate disturbances, and mentally ill or suicidal inmates, is dangerous

to inmates. For example, there should be procedures in place to separately house pre-trial felons from misdemeanants.

The Jail fails to provide a written grievance system. The failure to have a written grievance system leads to increased inmate tension which may translate to increased acts of violence.

D. Access to the courts and reading materials are insufficient. HCJ inmates are not provided access to any legal material. Further, with exception of the Bible, HCJ inmates are not allowed any reading material.

## II. Medical and Mental Health Care and Suicide Prevention.

A. Policies and procedures are grossly inadequate. The Jail has many written health care policies regarding medical services. However, for the most part, the policies were plagiarized from another facility and are not followed. There are huge discrepancies between what is written versus what is actually done to provide necessary services. For example, the policy on health appraisal states that a history and physical examination will be performed within 14 days after incarceration. Our medical consultant did not find a single instance where this examination had occurred.

B. Receiving screening and routine examinations are deficient. HCJ does not routinely screen or examine prisoners. There are no procedures established at intake to assess medical or psychiatric needs, or to determine which inmates can safely wait to be seen by medical providers. A receiving screening process is intended to identify any potential medical emergencies among arrestees arriving at the Jail. It is designed to prevent newly arriving inmates who pose a threat to their own or others health and safety from being admitted to the Jail's general population and to get them rapid medical care.

There is no system in place for routine health assessments. Inmates who are taking medications, have chronic or current illnesses, or have health problems related to substance abuse, seizures, trauma, infections, injuries, etc., are not being routinely identified in this facility. Communicable disease testing for, e.g., tuberculosis, AIDS, hepatitis and venereal disease is not addressed by the current system of care. Furthermore, HCJ staff are unaware of universal precautions. This is unacceptable and poses a serious danger to inmates.

C. Sick call is deficient. The current sick call system is not consistent with professional standards of care. Inmates access medical care by submitting a sick call slip to a jailer who then reportedly calls one of two medical doctors, neither of whom has a formal contract with the Jail. This "procedure" results in unreasonable delay in accessing medical services.

Significantly, there is no way to ensure that care is provided in a timely manner. HCJ fails to record any relevant dates including the date the sick call slip is submitted and the date medical care is provided. Reportedly, HCJ does not call the medical doctor regarding care requested by sick call slips until a significant number of slips have been submitted. Furthermore, HCJ staff who determine when the medical doctor should be called have no medical training. This practice has resulted in unacceptable hazards.

Moreover, there is currently no system in place to assure continuity of care. When patients are transported to the local physicians, no paperwork from the Jail is sent with them and no paperwork is sent back to the Jail after the inmate has been seen. One of the doctors when interviewed by our medical consultant indicated that he often has an "inadequate data base" to assess patients. The other doctor stated that she is not aware if her orders are followed, if specified consults are made, or if medications ordered are filled and dispensed. Our consultant found that inmates who have follow-up appointments with the physicians frequently do not go unless they submit another request.

D. Physician care is deficient. There is no health care professional who assumes responsibility for ensuring medical attention is provided to inmates. HCJ has only informal agreements with the two local doctors referenced above who reportedly provide services for the prisoners on an as needed basis. Medical care at HCJ can best be characterized as episodic.

E. Examination room and equipment are inadequate. HCJ does not provide an examination area for the sick call visits. First aid kits are not available.

F. Medication practices are deficient. Prescription medication is administered by Jail staff, none of whom have appropriate training.

G. Special diets are nonexistent. Special diets are not available as medically needed.

H. Dental care is nonexistent. Reportedly, dental services are available on an as needed basis and can be obtained by submitting a sick call slip. Inmates told our consultant that it was not possible to get dental services. Moreover, there is no documentation that dental services have been provided.

I. Mental health care and suicide prevention are inadequate. There is no mechanism in place to assess inmates' mental health needs or identify suicidal inmates on admission, or to provide counseling or other interventions to them during their

incarceration. Staff have not received any training in suicide assessment and provisions for crisis intervention are nonexistent.

### III. Environmental Health and Safety Deficiencies.

A. General sanitation is inadequate. While HCJ has constructed a new facility, the general sanitation of the Jail is inadequate. The Jail's current pest control system is deficient as the entire housing area is infested with ants. Throughout the facility, we observed numerous showers and lavatories with significant soil residue and mold growth. Reportedly, the Jail has a housekeeping plan, but was unable to produce supporting written documentation.

B. Fire safety is deficient. HCJ fails to have a fire plan. Indeed, with the exception of reports from the Fire Marshal, HCJ does not have any documentation relating to fire safety. HCJ fails to conduct routine fire drills.

C. Food services are deficient. The food is provided by a food service company. The Jail was unable to produce documentation that these meals are nutritionally adequate. Significantly, nearly 16 hours passes between meals. This is unacceptable.

D. Plumbing is deficient. The sewage system is inadequate and in danger of failure -- notwithstanding the recent vintage of the Jail.

### IV. Recommendations Regarding Correctional Practices.

A. Staffing and supervision. Conduct and properly document routine visual inspections of the housing areas. Inmate trustees should not be the sole aid available to inmates. Incidents involving violence must be properly documented, both in the individual offender's records and in a master log for the Jail. Master logs regarding violent incidents must be evaluated at appropriate intervals to enable jail administrators to properly deploy security personnel.

B. Staff training. Ensure all jailers have attended the state's jailer training school and receive periodic, additional training.

C. Policies and procedures. Create and implement comprehensive HCJ policies and procedures which must include, but not be limited to, a classification system, incident reports, disciplinary procedures, and suicide prevention. Ensure staff understanding and compliance with policies and procedures. Draft and distribute to every inmate a comprehensive inmate handbook

which includes, but is not limited to, explanation of the Jail's rules and regulations, and grievance and disciplinary procedures.

Create and implement a written grievance system.

D. Access to legal and reading materials. Provide adequate access to law books, writing materials and other reading materials for inmates.

V. Recommendations Regarding Medical and Mental Health Care.

A. Medical services. Create and implement comprehensive policies and procedures regarding the provision of health care. Such policies must cover, but not be limited to, initial medical screenings, non-urgent sick call requests, communicable disease testing, physical examinations and staff training.

B. Receiving screening and routine examinations. Thoroughly screen and assess the medical history of every inmate within 24 hours of an inmate's entry into the Jail. Ensure that medical conditions are referred to a health care professional. Ensure inmates are informed of the necessary procedures to access medical services. Complete physical exams must be performed by qualified medical staff within 14 days of an inmate's entry into the Jail.

Inmates housed in the Jail for more than seven days must be tested for tuberculosis and other communicable diseases, as appropriate.

C. Sick call. Ensure that sick call slips are dated and signed by the submitting inmate, receiving staff member and attending health care professional. Ensure that inmates receive prompt medical and mental health care.

D. Physician care. Retain the services of a "responsible health authority" ("RHA"). The RHA may be a part-time registered nurse but must be under a doctor's supervision. The registered nurse must have regular hours and should conduct daily triage and "walkthroughs" of the housing areas.

E. Examination room and equipment. Provide an adequate area for sick call triaging. This area must afford proper privacy and ensure professional and thorough examinations.

F. Medication. Ensure administration of all prescription medication by qualified personnel.

G. Special diets. Provide special diets as necessary. Ensure that all meals are nutritionally adequate.

H. Dental care. Provide inmates with prompt dental care. Dental services may not be limited to extractions.

I. Mental health care and suicide prevention. Create and implement comprehensive policies and procedures for the provision of mental health care. Create and implement suicide precautions. Ensure all staff are trained in recognizing and promptly referring to a qualified professional, individuals exhibiting common symptoms of mental illness, mental retardation or suicidal behavior.

## VI. Recommendations Regarding Environmental Health and Safety.

A. General sanitation. Thoroughly clean the entire Jail. Review and implement, with appropriate documentation of compliance, a Jail housekeeping plan. Ensure routine cleaning of all housing areas. Implement an effective pest control system throughout the Jail.

B. Fire Safety. Create fire exit plans and post them conspicuously throughout the Jail. Develop, based upon consultation with an appropriate professional, written plans for an emergency/disaster, e.g., flood or fire. Maintain an emergency generator. Conduct and document routine fire drills. Ensure proper storage of gasoline and gasoline powered equipment.

C. Food services. Ensure that inmates receive nutritionally adequate meals. No more than 14 hours may expire between meals.

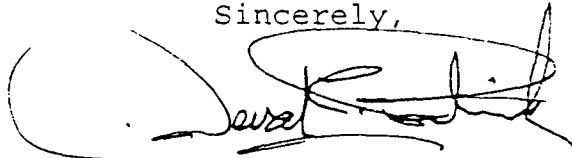
D. Plumbing. Maintain all plumbing in proper working order.

Pursuant to CRIPA, the Attorney General may initiate a lawsuit to correct deficiencies at an institution 49 days after appropriate local officials are notified of them. 42 U.S.C. § 1997b(a)(1). We expect to hear from you as soon as possible, but no later than 49 days after receipt of this letter, with any response you may have to our findings and a description of the specific steps you have taken, or intend to take, to implement each of the minimum remedies set forth above. If you do not respond within the stated time period, we will consider initiating an action against your jurisdiction to remedy the unlawful conditions.

We look forward to working with you and other County officials to resolve this matter in a reasonable and expeditious manner. If you or any member of your staff have any questions,

please feel free to contact the attorneys in the Special Litigation Section assigned to this matter, David Deutsch, (202) 514-6270, Shanetta Y. Brown, (202) 514-0195, and Christopher Cheng, (202) 514-8892.

Sincerely,

A handwritten signature in black ink, appearing to read "Deval L. Patrick", written over a horizontal line. The signature is stylized and somewhat cursive.

Deval L. Patrick  
Assistant Attorney General  
Civil Rights Division

cc: Brian Boyd, Esquire  
County Attorney

Mr. Mike Jolley  
Sheriff  
Harris County Jail

James L. Wiggins, Esquire  
United States Attorney  
Middle District of Georgia

Mr. Ted Stoler  
Inspector  
U.S. Marshals Service