Norfolk Inmate Council Executive Board 2 Clark Street / P.O. Box 43 Norfolk MA. 02056

July 01, 2024

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Vital Core Attn: CEO Viola Riggin 719 SW Van Buren St. Suite 100 Topeka KS 66603

RE: Norfolk Inmate Council (NIC) Introduction

Dear Vital Core :

I am writing on behalf of the Norfolk Inmate Council (NIC) to introduce our group and express some concerns of the past medical care within the facility.

First I would like to congratulate CEO Riggin for her ACA Cass Correctional Achievement Award on behalf of the (NIC) as the prisoner elected quasi government at MCI-Norfolk.

To speak to some of our work. The Norfolk Inmate Council is the only prisoner elected political body that represents all prisoners in Massachusetts and the country in this level of structure. The organization is led by the group's Executive Board which I (William J. Duclos) am part of. We have Unit Representatives who bring prison wide issues to 3 meetings a month and vote according to Roberts Rules of Order as to the direction of advocacy efforts. Also this body votes on bills to request financing for everything from appliances to gym equipment from the Inmate Benefit Fund. Our responsibilities include but are not limited to overseeing a diverse collective of committees such as the Young Men's Commitee, African American Coalition Committee (AACC), Latino Cultural Awareness Committee (LCAC), Asian Cultural Awareness Committee (ACAC), Education Committee, Legal Advisory Committee etc.

The NIC was formed from the building of MCI-Norfolk by visionary Superintendent Howard Gill to provide incarcerated people with a voice in their/our incarceration and rehabilitation. Also to foster a sense of collaboration with outside organizations, stakeholders (such as yourself), lawmakers and advocates. As well as acting as the connecting body between the prisoner population, administration and correctional staff.

Notable work / accomplishments of the NIC are : Restorative Justice (RJ) first began as presented to the administration by the NIC and approved, which now stands independent of the NIC. Community Day which is a yearly fair which allows all programs, goups, religions, and committees an opportunity to present their groups to the general population. Each Christmas Holiday season the NIC with Unit Representatives assistance gather donations for the men housed in the Critical Stabilization Unit (CSU) (medical unit) and give the donations to the prisoner/patients on Christmas morning. Monthly the NIC Activities Committee in conjunction with the Executive Board and Unit Representatives facilitate Bingo night with a small amount of donations for the CSU patients. Committees also offer men with the opportunity to sit on boards in civic engagment through problem solution based dialog. Some committees host events for things such as Black History Month, Latino Cultural, the Music Committee puts on about 5 concerts a year, memorial events to remember the death of prisoners.

This Community (MCI-Norfolk) is one that allows prisoners to embrace differences and all cultures also a place to problem solve and learn conflict resolution, and working together as a community.

Also I am attaching a list of many of the concerns which the NIC has advocated for in the past and would like further dialog as to your vision and goals and objectives moving forward if possible.

At some point you may be interested in connecting with the (NIC) or a colleague. Please contact me directely (William J. Duclos, W48807). As a body we are committed to answering questions and engaging in productive dialog to benefit all stakeholders. If you would like to connect to us it would be most welcome. Via US Mail, Corrlinks.com, video conference, or in person. Also feel free to share this information with whomever you feel led to.

On behalf of the NIC Executive Board and population thank you for your consideration moving ahead.

Respectfully,

William J. Duclos W48807 / MCI-Norfolk P.O. Box 43 Norfolk MA 02056

cc: NIC Executive Board file

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RE:MCI-Norfolk / Medical Concerns

- Medication Distribution: The Pharmacy continues to have issues with supplying medications (Heart Related, Blood Pressure, seizure medications, etc.) simple items such as Ensure (protein / fortified) drink supplements many times are not started until weeks after the prescription / order is given resulting in only a fraction of time spent on the designated item. Also medication lines for many takes one hour and prohibits many activities also this discourages patients from taking medications. This also creates an inconsistent taking of medications for many. Addition of a 3rd medication line would be helpful or placing more meds on KOP.

- The grievance process does not work for the most part. many times grievances are approved but actions are never taken on the remedies.

- Prisoner (Incarcerated Individual) diets are poor and the medical provider should be more engaged and have greater input and oversight into food quality and health factors involved. Failure to involve Medical (Vital Core) only will further drive up costs and harm patient overall care.

- CSU (Medical Unit) houses about 16 prisoners and 4 mental health cells. However due to the ageing population and health complications at MCI-Norfolk often time prisoners are housed in MH watch cells. Poor air flow and non medical beds. The prisoners placed in these cell have ranged from heart procedures to surgery and medical watches.

- CSU Medical Unit: Prisoner Companion Program has been a great success in helping to care for the elderly. However this could be enhanced via certification of prisoners as CNA's which would require a collaboration with MA-DOC Education and Program services.

- Many times medical parole diagnoses are different under review than told to the patient which creates mistrust among patient provider.

- HIV medical care has not progressed with the medical advances over time. Prisoners are forced to wait in lines for sometimes up to 40 minutes for medications when they could be provided as keep on person (KOP) or provide new monthly Cabenuva regimen for care. Also diet greatly effects this population and lack of immediate care for medical conditions.

- Health Information HIPPA also has many prisoners concerned as to security staff being in the room when care is provided and that information being spoken of at Officers stations.

- Interference from non-medical staff in decision making for areas such as: MH Crises, Medical or MH single cell status and transportation Reasonable Accommodations for prisoners with claustrophobia related issues, gender dysphoria, etc.

- Gender Dysphoria: prisoners treatments and care is delayed through lengthy court actions resulting in self harm and poor mental health decline.

- When prisoner/patients are seen and diagnosed by outside medical providers the order / prescription does not follow them back to the facility or get placed into their files. Thus orders for simple items such as pain medications, antibiotics are only given for a fraction of the ordered time.

- Preventative care can save Vital Core and better prepare prisoners for reentry. Healthy living, check up's more than once every three years for no chronic care patients, vitamin's and health supplements. Seminars etc.

- Substance Use Disorder (SUD's): This is a growing problem across the nation and MCI-Norfolk with all the benefits is not exempt from this. However there needs to be more innovative thinking and limitations of DOC removed and collaborate with outside stakeholders to better provide for this population. Methadone should not be the only standard of care. Buprenorphine etc. Also medical marijuana for those with synthetic canabinoid addiction (K-2).

-Medical emergency email system which is now free in MA-DOC should be offered immediately for reporting of medical concerns.

- Interpretation: There has been barriers in interpretation especially for the Asian / Pacific Islander patients. The DQC's interpretation phone system is ineffective and has caused delays in care. The understanding of the NIC is that in society hospitals and health care providers have tablets that help to interpret all languages and any progress to have them available at facilities will be most helpful.

Thank you once again on behalf of the NIC and population.

Sincerely,

William J. Duclos W48807 / MCI-Norfolk P.O. Box 43 Norfolk MA 02056

cc: NIC Executive Board file