TESTIMONY HOUSE CORRECTIONS AND INSTITUTIONS April 15, 2016

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Thank you for the opportunity to address the Committee in support of JRS 35. The Vermont Human Rights Commission is concerned about the lack of adequate treatment for inmates who have mental health issues (including but not limited to those designated SFI) and lack of coordination among AHS departments. The Stepping Up program offers the State an opportunity to put systems in place that would help to remedy both issues.

The Departments of Mental Health, Corrections and Aging and Independent Living are required to coordinate to provide "[o]ther services" to inmates that the three departments "jointly determine to be appropriate." The plain language of this section appears to require that the three agencies work together to ensure appropriate services. Instead, the departments appear to be operating within "silos". Both physical and mental health services are delivered solely by DOC contracted medical providers and DOC staff.

We have concerns about a number of specific issues:

- When an inmate is incarcerated, DMH presently takes no responsibility for the services received (or not received) by that individual even when the DMH may actively be seeking a Level I bed for that individual.
- The DOC contracted medical providers are or were not fulfilling their contractual responsibilities to inmates with mental health issues (evaluation, creation of treatment plans, minimum visits by mental health staff, modification of disciplinary rules, etc.) and there does not appear to be adequate oversight of those contractual obligations by the DOC¹;
- Inmates are being kept in conditions that meet the definition of "segregation,"
 whether or not they are called segregation, due to lack of adequate mental health
 treatment and services. These conditions often exacerbate the inmate's mental
 health;
- Inmates are housed in prison cells due to the lack of sufficient Level I beds;
- There is a lack of coordination among DAIL, DMH and DOC in setting up services for inmates who have met their minimum sentences and are eligible for release but cannot be released without the services in place;
- There is a lack of training for correctional staff who are dealing with inmates with mental health issues even though the statute requires eight specific mental health topics for medical and correctional staff. 9 V.S.A. §907(6)(A)-(G).

¹ This information relates to the prior medical contractor. HRC does not have information about the current provider. This may or may not be an on-going issue.