

## **Child Birth Planning at DOCCS**

### **Women Incarcerated**

The number of incarcerated women has declined sharply to approximately 2,400 inmates housed within several correctional facilities. All New York facilities are accredited by the American Correctional Association.

### **Health Care**

The delivery of quality health care services is an integral facet of the agency and DOCCS is committed to providing health care consistent with the standards of care in the community. With a female health care operating budget of more than \$28 million annually, DOCCS spends \$12,171 per inmate per year on health care, twice as much than males. Reproductive health care remains a critical priority and our policies for women contain provisions for prenatal and postpartum treatment.

### **Admission to DOCCS**

All female inmates must complete the reception and classification process at the Bedford Hills Correctional Facility regardless of whether their initial intake is through Bedford Hills or Albion Correctional Facility. Any pregnant inmate who's admitted to the state prison system directly at Bedford Hills Correctional Facility will remain at Bedford Hills through her pregnancy, delivery, and recovery. Any female inmate admitted at Albion must be transported to Bedford Hills to complete the reception and classification process. A pregnant inmate or inmate within eight weeks after delivery or pregnancy outcome, absent extraordinary circumstances who's admitted at Albion is transported via non-central transportation bus. No restraints of any kind shall be used during transport of such woman. If an extraordinary circumstance exists, wrist restraints in front of the body may be permitted if authorized by the Superintendent after consultation with medical and security staff.

### **Grievance Program**

Inmates have the right to express their dissatisfaction with any service or process to which they are a party. Inmates that allege harassment, abuse or discriminatory treatment have access to special grievance procedures to address their concerns if the complaint is not resolved through informal channels. Besides one pregnancy grievance relating to a snack, no other pregnancy related grievances were recorded since at least 2009.

### **Historical Policy on Shackling During Childbirth**

Each year, approximately 30 inmates give birth at an outside hospital under contract with DOCCS. Prior to the Anti-Shackling Law of 2009, policies enforced at DOCCS and the outside hospital prohibited the use of any restraints during any part of an inmate's childbirth hospital stay, as well as during transportation to and from the hospital. However, under certain exceptional circumstances, the use of a single wrist cuff was allowed during transportation for safety and security reasons, if authorized.

### **Amended Anti-Shackling Law of 2009**

No restraints of any kind shall be used during transport of such woman, who is known to be pregnant by correctional personnel or personnel providing medical services to the institution or local correctional facility, or a woman within eight weeks after delivery or pregnancy outcome, absent extraordinary circumstances. If a determination has been made that extraordinary circumstances exist then restraints shall be limited to wrist restraints in front of the body. No restraints of any kind shall be used when such woman is in labor, admitted to a hospital, institution or clinic for delivery, or recovering after childbirth. Any woman confined in an

institution or local correctional facility shall receive notice in writing in a language and manner understandable to her about the requirements of this section upon her admission to an institution or local correctional facility and again when she is known to be pregnant. For more information, please see Correction Law §611.

### **Training**

DOCCS continues to advance its commitment to protect the health, well-being and safety of inmates. DOCCS is committed to staff education and training and provides clear policy, directives and planning, insuring that health and security staff comply with ever-changing laws, regulations and codes. A Captain, the second highest-ranking security position, advises all new Lieutenants and Sergeants regarding the policy of transporting and housing pregnant inmates. Because security coverage is vital for all inmates, employees receive training in all aspects of HIPAA and are keenly aware of the need for confidentiality during medical exams, procedures and questioning. Every effort is made to afford an inmate's privacy while maintaining security coverage. This includes same sex supervision during outside hospital procedures that require exposure of an inmate's private areas.

### **Environment & Nutrition**

DOCCS actively monitors temperature, ventilation and utilizes pest control programs to ensure compliance with applicable standards. Dieticians are involved to ensure nutritionally and calorically adequate diet to all inmates, including those with special dietary needs.

### **Work Release**

Absent an especially high-risk pregnancy, a pregnant inmate can remain on Temporary Release and receive care in the community for most of her pregnancy. In order to provide intensive prenatal care and monitoring to ensure the safety and wellbeing of the female inmate and her unborn child, an inmate is transferred to Bedford Hills Correctional Facility 30 to 60 days prior to the inmate's delivery date. After delivery and a period of recovery, the inmate can return to the community where she can benefit from special programs specifically designed for new mothers.

### **Determining When to Transport for Delivery and Childbirth Visitors**

DOCCS errs on the side of caution when deciding when to transport an inmate to an outside hospital for childbirth purposes. On a number of occasions, inmates were transported by ambulance to an outside hospital only to have the inmate immediately returned to the correctional facility after a hospital employee made the medical determination of "false labor." Family members are permitted to visit with the inmate mother following the birth of the child, consistent with visiting policies and procedures of the hospital.

### **General Transportation**

For pregnant inmates, it is also the Department's policy not to restrain such an inmate when being transported outside the facility for routine matters (e.g., court, approved medical appointments, etc.). However, if security concerns exist, DOCCS may authorize the use of wrist restraints in front of the body if authorized by the Deputy Superintendent for Security in consultation with medical staff.

### **Special Housing Unit (SHU)**

Pregnant inmates are not placed in Special Housing Units. As part of the interim settlement in a federal lawsuit brought by the New York Civil Liberties Union, (*Peoples, et al. v. Fischer, et al.*), the Department issued a memorandum dated March 13, 2014 that precludes a pregnant woman's placement in a Special Housing Unit cell (SHU), in the absence of an exceptional circumstance. No exceptional circumstance determinations have been made to date and none

are expected. The Department does not recall any instance of knowingly placing a pregnant inmate in SHU prior to or following the interim settlement.

### **Nursery Program**

DOCCS is one of only a few states that offers a nursery program where babies can remain with their inmate mother for up to 18 months. The nursery program, seen as a national model, provides a beneficial growth environment for babies and provides mothers with parenting skills, education and treatment programs. Operated since 1901, media groups have produced local, state, national, and international stories about the success and uniqueness of the program. While every attempt is made to approve applicants, DOCCS follows the letter and spirit of Correction Law § 611. A great deal of pertinent information is reviewed before a final application determination is made, including the careful review of any input from social services agencies with prior involvement with the inmate. On its face, the statute provides only two grounds for denying a mother and child the opportunity to remain together-- 1) if the mother has been determined to be physically unfit to care for the child by the correctional facility's chief medical officer and 2) if it is not desirable for the welfare of such child to stay with the mother. The totality of the circumstances is considered in determining the best interest of the child.

(The information sheet is not inclusive of all health care services delivered, but instead compliments our agency policies for health care access.)

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