



# FAMILY COUNCIL MEETING MINUTES

Location: Stafford Creek Correctional Facility Date: 06/10/2022 Time: 09:00-11:00am

Teleconference details: Call in number: 1-253-372-2181; Phone Conf. ID # 784-921-425

<b>Meeting Attendees</b>
--------------------------

Department/facility co-chair: Gina Penrose, Associate Supt. of Programs  
 Family co-chair: Diane Sifres

Facility/council secretary: Gladys Ramos Family secretary, Vanessa Lewis

Members present: Asst. Supt. Gina Penrose, Superintendent Haynes, Associate Van Ogle, LBA Richardson, ICP/CPM Schreiber Sec. Spec. Bolden, Chaplain Wakeman, CI . Aliff, Mailroom Sgt. Wilkinson, CUS Jolly, CPPC Branwyn Mansford, CPM Stefanie Baltzell, HSM3 Evans Shane, Ivey Frederick, CUS Jones, RN4 Melissa Lynch, Sec. Sr. Kerri McGarrah, Caroline Melhuish, Jayme Peterson, CC2 Schnase, CC2 Sherman, CUS Bravos, Monica Ritter, Captain Rubalcaba, CUS Sullivan, Martin Williams

Non-council member attendees: Tammy Bertrand, Stacey Wu, Tamara Lacey, Annie Trepanier, Lydia Schoen, Diane Sifres, Anya Ivanov, Joanne Todd

<b>Agenda</b>
---------------

Old business: None

New business

Topic	Discussion/Key Points	Next Steps
<p>State Family Council update Presented by Lydia Schoen</p>	<p>Updates from Deputy Secretary Murphy, pow wows cultural group activities delayed due to COVID working with Tribes on this matter due to it being an outside entity.</p> <p>Looking at restrictive housing reform, providing programs too. 400 currently with 380 under investigations</p> <p>Programs- Juneteenth Holiday best way to celebrate through Management support.</p> <p>Agenda for August with Amend program.</p>	<p>Juneteenth – Chaplain Wakeman Assistant will send documentation to population interested-</p> <p>Pow Wow plan with Chaplain, regalia going with recreation for the I/I gift vital piece of those Pow Wow. Moving forward to be out of this outbreak shortly and work on these items.</p>

<p>Visiting Update</p>	<p>SCCC staff went to Norway with Amend program.</p> <p>Health Services- Update. Dr. Curl stated Boosters available to all facilities to be offering them through kite requests.</p> <p>Statewide Dental COVID test daily instead of weekly. Due to Positives still lingering within facility.</p> <p>Visit safe start guide on size and facility May increase visit days.</p> <p>Family Services for visiting rooms New chairs, Message boards electronics, positive relationship building activity to have more interaction among all</p> <p>Expanding Children's area and more interactive. Looking into large table size</p>	<p>Correctional Program Administrator Lisa Flynn with Dr. Curl will check on this.</p> <p>Deputy Secretary Murphy will investigate this for cleaning and sanitation.</p>
<p>CPPC/ Family Friendly Updates</p> <p>Presented by Branwyn Mansford</p>	<p>Finishing significant other event hoping soon, had this issue before with June cut off. Could use the Monies from next year to send out for costs. Will go out later due to pandemic issues.</p> <p>Parent and mentor during summer, August when funding comes in for this.</p> <p>Video grams- August funding will start all over.</p>	<p>August for backpacks distribution, in person let's hopes this time around. Pack it up and send out, still happening and supporting kids to share with' educational experience.</p>
<p>Financial</p>		<p>See Attachment Provided</p>

<p>Presented by Local Business Advisor Samantha Richardson</p>	<p>Budget % In colors easy on the eye and on spend downs. Run through March quarterly old information. We have been spending “Back to school” previously not spent much. Movie \$ motions journals and paint, left in family focus, not spent.</p> <p>Hotel voucher won’t change much since no EFV to be able to spend that \$. Our spring event art supplies, shipping.</p> <p>Winter all funds and expenses, video greetings as spoken before we will get going again.</p> <p>Adult funding available through March. Utilize popups funds from Head Quarters for additional crafts.</p> <p>EFVs tricky- Amounts up and then down which they go hand in hand, a lot to spend. We purchase through Head Quarters supplies, bedding, pots, sheets. A total \$7000 spent on EFV. When visiting gets starting again all new supplies.</p> <p>Violence prevention spent all \$ on hot dogs/ Ice cream for field day events. On hold now due to outside COVID restriction.</p> <p>Programming – New mattresses for EFVS and equipment. We continue another order today and move forward.</p>	<p>LFC Member Question \$88,000 unspent- will it be spent at all?</p> <p>We must spend and await on events. We don’t want to leave \$ here we have to spend this on recreation,</p> <p>To Superintendent Haynes and Associate Supt. of programs G. Penrose 20 days left in spending period \$ 40,000 limited if events not happening. Is there a shortage elsewhere we need supplies? I’m looking at this, lets buy more recreation equipment. Shortages, some units cleared, bring I/I better food. Better ideas to come up with, to not miss this opportunity in the next 20 days.</p> <p>Supt. Haynes answer: We will try to spend by the end of the month</p>
--	---	---

<p>Mental Health Presented by Health Service Manager 3 S. Evans</p>	<p>Dr. Furst Psychiatrist &amp; Psychosocial to all staff</p> <p>SCCC has 3 Blue badges, Psych Associates Permanent employees, 2 contract associates “Yellow badges”.</p> <p>Dr Herron Psych 4 Psychiatrist.</p> <p>Social worker provides reentry.</p> <p>Functioning with Incarcerated Individuals we do most within the units, weekly in all units.</p> <p>Mental health in units #2 purposes any emergent issue, usually a list received by referrals or concerns for follow up. When they come in Psych associate review 13- 420, or this comes from staff other providers.</p> <p>We notify mental health if Incarcerated individuals might be having some concerns dedicated file review concerns, check meds have they been compliant.</p> <p>LFC Member Question</p>	<p>M-F on call on Weekends</p> <p>Incident Command Center facilitates access with creative medical alternative clinic with sick call to address urgent or nonemergent issues.</p> <p>COVID clinic for those displaying any symptoms with monitoring daily. Mental Health functioning the same way. Psychiatry clears the recovered back on regular schedule. Task out, SCCC ask Dr. Furst to review who arrived on SCCC incoming for all meds orders and issues.</p> <p>SCCC assigns a Psych 4 to check in with officers. The greatest source of info is due to baseline. Then we check in with them, walk around and see that everything is good. Present to ask questions which they also get a list of concerns about follow up more frequently.</p> <p>Kites- box located in dining hall, how often is it checked</p> <p>Check daily, morning. If on normal movement to mainline for food access, then. If they have limited movement, we collect unit by unit. Staff daily at 5: 30 am they do checks of facility or box SCCC checks the triage of all those kites for critical issues, self-harm sick</p>

	<p>Weekly checks are those for all I/I Do you ask I/I how they are doing?</p> <p>LFC Member question- Has a suggestion been made in each unit for kite delivery and quicker responses.</p> <p>Easier for not moving the current locations. We collect them unit by unit. Shorter would be helpful. Full movement- chow hall best for locked box and protection for info. Medical staff does daily checks in units also.</p> <p>LFC Member Questions –</p> <p>Does Health Services do weekly check in the units, are they a good crisis team. When they go in weekly with the Incarcerated Individual to see how it's going on suggestions for info. A lot are having a crisis and scared living with a lot of anxiety. How are they getting feedback and aware of changes? Seems they are left alone. With no coping strategies, or assumption of needs.</p>	<p>to clinician. We see them or I/I are brought to the clinic. Meds renewed, on sick call, addressing many issues.</p> <p>I/I get referred to appropriate place medically. Emergent, non-emergent kites are tracked by Health Services. Which are tracked for quality assurance within in 5 days response.</p> <p>Crisis mode- SCCC gives living unit staff mental health distribution list to email if an issue arises. To all staff, if not at work someone gets it and responds. They move it up and use the on-call person. To make sure we get immediate care onsite. 10- 30 min time lapse of I/I escorted to medical building to be seen. Option available for medical on site for Isolation/ Quarantine to observe by professional policy for these issues.</p> <p>SCCC focus is on Mental Health, Psych staff walks the units and unit staff to help those who are struggling w anything. We make ourselves visible and available. We must rely on the men to help with this.</p>
<p>Associate Supt. Penrose on behalf of Food Service Manager Attard</p>	<p>Food Services- Processing food order.</p>	<p>Week of June 27, 3 hot meals a day no boats. Gave you good news!</p>
<p>Safe Start/ Updates Incident Command Post/ Correctional Program Manager R. Schreiber</p>	<p>I/I positive they remain in living unit to wait till fully rapid antigen. SCCC PCR test all Quarantine in that area. They will get that day 5 and day 7 to clear. Day 10 in that area's rapid antigen test. If they</p>	<p>Boats for lunch, new schedule yesterday 9-3:30 no break at lunch. 3pm count and reconvenes at 6pm with 1 hr. rotating an hour a day. Stipulation, 3 hot meals to no REC during mealtimes. ½ REC pre COVID by pods not by units.</p>

	<p>rapid antigen test negative, they will come off quarantine.</p> <p>Pg.15 Section 4 guidelines safe start version 32.</p> <p>New criteria for testing positive and Quarantine and Isolation. SCCC encourages to separate, Will talk about new schedule of 1 hr. rec session.</p> <p>LFC Member Question Safe start outside time more than an hour a day?</p>	<p>We are giving as many hours as possible on availability.</p>
<p>Organizational Chart Asst. Supt. Penrose</p>		<p>Email Associate Superintendent of Programs G. Penrose/ AA3 Ramos</p>

**Roundtable open discussion**

**Question 1.** – Follow up question on mattresses?

**Answer-** Small delivery this week 15 by unit, in next 4/ 5 weeks 350 a week delivery. Every week until 1420 mattresses to replace everyone’s at SCCC 6-inch blue mattress or gray. The blue 6-inch last August, delivery those individuals will not receive a new one this time around.

**Question 2.-** Who made the decision to change the gym to a clinic?

**Answer:** The team discussed options to be able to accommodate the rise in medical needs and the gym was the best location. No predictions yet on how long this will last. I do not have a crystal ball to see the future.

**Answer-** SCCC met with Department of Health and Head Quarters to find alternate locations for the alternate clinic. The gym to a clinic, conversation on strategies happening currently to return to normal operations soon. Chow halls for pick up an idea to use for quicker and efficiency, this idea had been moved on to Head Quarters

**Questions 3.** Consistent diet with carbs- special meals for diabetics are the same as other Incarcerated individual’s diet. This defeats the purpose to the diabetic. Especially if trying to manage insulin. 2. Timing insulin with main line not being called before or after meals. Diabetics ask for snacks, and they are not getting them at the insulin line.

**Answer-** Insulin is the same time as mainline. If Incarcerated Individuals are eating meals at strange times acutely unaware. SCCC nurses has snacks to hand out during for those needing it. Consistent every day- all nurses at insulin line have a bag. Will address issue on window for ex snacks?

**Question 4.-** Visit new month's coming up, new applications if it opens again?

**Answer** We will reschedule our staff, days before.

**Question 5.-** Tier reps' meetings stated Supt. of Operations D. Van Ogle & recreation schedules plan with Graves was being worked on.

**Answer** No plan currently at all, recreation during lunch due to breakfast/ lunch pick up. Increase the time per week. With the 3 hots meals then we will adjust recreation schedule.

**Question 6.** Pill line issue taking too long.

**Answer** Pill line slower by pod, I will investigate this.

**Question 7-** What is the visit room being used for? We are working out of outbreak. Please give a visual of how the clinic is being worked. When someone is concerned of symptoms of tuberculosis over a weekend how does it get handled?

**Answer** Kite reviewed first, then bring 10-20 I/I per sick call, as identified as urgent emergent by provider 5 days a week. Patients that are symptomatic we monitor daily. SCCC combines urgent/ non-emergent issues based on kite reviews initially daily. I/ I is then brought into the gym with optimal spreading with no tight space, chairs out for waiting to be seen and accessible movements for all while in there. Understand the optimal use of it, something that worked well and working on other options to have the gym back to the I/I soon.

**Answer** The gym as an alternate clinic is only during outbreak status. After outbreak we will make availability happen again.

**Answer** SCCC can treat incarcerated individuals with space in one central location, why the gym was an option.

**Question 8.** What is the visit room being used for? We are working out of outbreak. Alternative housing last not being used. The alternate clinic at different times, please give a visual how the clinic is being worked. When someone is concerned of symptoms of tuberculosis over a weekend how does it get handled? take too testing for tuberculosis, follow-up, where to move?

**Answer-** The gym is closest to medical for supplies and medication in an urgent setting. We can't move everything from medical. It is a central location for all incarcerated individuals. If symptoms on weekend, I/I get assessed by nursing. Medical clinic is open on the weekends with appropriate staffing for emergencies or issues that may arise.

**Questions 9-** Holiday weekend concerning weight loss of incarcerated individuals- they asked for tuberculosis testing, and they were told they would have to wait for a week. Wondering on confusion.

**Answer** SCCC will investigate this.

**Answer** -Alternative clinic functions identified by tiers due to covid movements. Placements for incarcerated individuals with counseling, reading, x rays if needed. Providers identify latent individuals; treatment options are presented to meet them in education on meds available. SCCC offers treatment, or advice to start it. If not started on medication another opportunity with counseling, follow up for side effect. If I/I refuse call out, SCCC medical staff will call them out again to provide as much information for decision making strategies. They will see incarcerated individuals' multiple times try to educate and support

them to give as much information. Close with Department of Health will flow with folks and staff working it.

**Questions 10.** Confusion with moving to EFVS, some sent elsewhere when suspected to moving other facilities

**Answer.** SCCC Isolate I/I in our EFVS, for further testing, why safety places there for monitoring and testing. Movement outside facility is best space outside if a negative pressure room available to.

**Answer-** Incident Command Post looking for alternatives with full movements and normal routine. No firms

Associate Superintendent of Programs G. Penrose- We are moving forward as planned with Pow Wow outside of Outbreak exists. Doing an event with visitor's minors, cross cohorts. A different look from last 2 years. Hopeful it goes back to normal or the pow wow might be smaller. Special foods with regalia gift a lot of multi communication in visit room for this happening. Area next to it as family friendly, which is a huge step forward, we are predicting on high hopes to make it happen. SCCC planning stages as this time, we are looking forward to positivity and a new normal.

How to get on the upcoming agenda- Please contact Diane Sifres by Sunday deadline for Facility to include answers prior to the upcoming meeting.

Next meeting location: Teleconference Date: August 13,2022 Time: 0900-1100

Comments: Call in number: 1-253-372-2181; Phone Conf. ID # 784-921-425

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 00-03, RCW 42.56, and RCW 40.14. Upon completion, the data classification category may change.

Distribution: **ORIGINAL** - Family council co-chairs