

STATE OF MICHIGAN  
DEPARTMENT OF ATTORNEY GENERAL



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June 30, 2016

Ms. Mellie Nelson  
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U.S. Department of Justice  
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950 Pennsylvania Avenue, N.W.  
Washington, DC 20530

Ms. Susan DeClercq  
Assistant U.S. Attorney  
U.S. Attorney's Office  
211 W. Fort Street, Suite 2001  
Detroit, MI 48226

Re: Updates since your April 2016 visit to WHV and Response to Your  
Closing Expert Reports received May 26, 2016

Dear Mellie and Susan:

I have received your May 26, 2016 cover letter to the two closing expert reports from Robert B. Greifinger, M.D. and Joel Dvoskin, Ph.D., ABPP (forensic) describing the many areas of improvement, and in some instances, innovation at WHV. The closing reports also make several "best practices" recommendations that WHV considers beyond the requirements of the ADA but have been taken under advisement.

Access Issues Resolved

As your experts pointed out and as you know from our interactions since October 2010, WHV has improved prisoner access to physical and mental health services for prisoners with and without mobility impairments. WHV opened up a separate medication line on the West side of the facility to supplement the East Side medication line, thereby improving timely access to prescribed medications for all prisoners. WHV, with their disability coordinator, re-organized assistive device and helper assignments and, through the wheel chair clinic, caught up with necessary wheel chair repairs, which significantly aided the mobility impaired prisoners' access to programs and services on site. WHV made approximately four million dollars' worth of physical plant modifications to improve prisoner access to showers, bathrooms, the chow hall, programing building and other services and recreation areas. WHV will soon open a health care clinic on the West side to make it easier for prisoners on the West side to get to the clinic and also improve operational

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efficiency by allowing improved timeliness of health care access to the entire prisoner population.

WHV also innovated a personal notification system for hard of hearing and deaf prisoners that has been operational for approximately two years. This personal notification system supplements the Operating Procedure modification mandating staff attention to impaired prisoners to ensure timely evacuation in case of emergency as well as the housing unit common area notification lights to remind hearing impaired and deaf prisoners of standard events, such as count and chow call.

I have not received any communication from you concerning my April 18, 2016 letter to you enclosing the DVD demonstrating completion of the improvements of WHV's physical plant. These physical plant access solutions were one of the two primary issues you mentioned in opening your investigation of WHV concerning ADA compliance. WHV understands that you consider the physical plant concerns to be resolved.

#### Additional Updates Mental and Physical Health

Michigan Department of Corrections (MDOC) Sheriffs' Questionnaire Form: The warden of the Egeler Correctional Facility will send a letter to all of the Michigan sheriffs requesting the sheriffs' and jail administrators' compliance with completing the MDOC's Sheriffs' Questionnaire Form. That letter will be followed, after a short period, with a notice from the Michigan Sheriffs' Association to all Michigan sheriffs and jail administrators encouraging those entities to complete the MDOC's Sheriffs' Questionnaire. While the MDOC does not have the authority to require the sheriffs and jail administrators to provide the MDOC reception centers with completed sheriffs' questionnaires, it is hoped this renewed effort will gain improved compliance.

Working with Developmentally Disabled Prisoners In-Service: An in-service training is being scheduled for August of this year. The training will be provided by Russ Scabo, Ph. D. and a member of his team, Ms. Pat Matuszak, M.A., both of whom are from the St. Louis Correctional Facility. The focus of this training will be on recognizing the issues involved in providing medical and mental health care to developmentally disabled prisoners and will be provided to WHV mental health and medical staff.

Live Suicide Risk Identification Training: WHV has provided live suicide risk identification training to more than 266 WHV staff in the last two months and has nine more live sessions scheduled this year. WHV will consider, in each subsequent year, whether an update of the annual suicide risk identification training will be

live or computer based but will keep in mind staff turn-over rates and compliance with suicide risk monitoring procedures.

**Performance Improvement:** The new WHV Health Unit Manager (HUM) will be taking a look at additional quality improvement metrics and considering how to present the information to the health care staff on an on-going basis to build on the performance improvement work former WHV HUM Duncan instituted in her monthly performance improvement meetings.

**Suicide Risk Assessment Plans:** WHV Acute Unit Chief Chris Wilson and Out Patient Unit Manager Denise Armstrong will continue the work they began of improving Treatment Plans and Management Plans, which are described in your expert reports, and extend that training to Suicide Risk Assessments. This will be an on-going effort.

**Calhoun Unit Improvements:** WHV is scheduled to begin in the new fiscal year beginning October 1, 2016, the renovation of the Calhoun acute unit to add the eleven additional wet cells. WHV has already added a new social worker to the existing staffing for Calhoun unit, who began working on Wednesday, June 8, 2016. An Activity Therapist has been hired with an employment start date of July 17, 2016. The addition of an activity therapist along with the additional social worker will allow an improved therapeutic environment in Calhoun acute unit with significantly more out-of-cell therapy opportunities for the prisoners on the unit.

**DBT:** WHV appreciates your expert Dr. Dvoskin's recognition of WHV's DBT program as "World Class" and intends to continue the program with expanded capacity as it matures. Of note is that this program has been providing meaningful gains to the prisoner population and is accessible to hard of hearing prisoners, in one instance allowing a hard of hearing prisoner to become a DBT program mentor.

**Peer Support Program:** The Peer Support training program is new, having started in January of this year, and is providing useful training to the prisoners in the program. Other prisoners in mental health treatment appear to be benefiting from the involvement of the Peer Support persons as well.

Finally, WHV wants to acknowledge the cooperative effort of the DOJ and its experts throughout your investigation. You and your experts have provided ideas, discussed their application, and considered our views. These discussions have led to

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numerous changes and innovations you have noted. WHV appreciates the efforts of all involved to bring your investigation to a successful close.

Sincerely,



A. Peter Govorchin  
Assistant Attorney General

APG:kjs

Enclosures

cc: Daphne M. Johnson, Administrator, OLA  
Women's Huron Valley\DOJ\Report 063016