

New York City Department of Correction

Use of Trauma-Informed Care Report

Calendar Year 2020

Training Data

Academy Recruit Training

The Department did not have any recruit activities during CY2020.

Mental Health First Aid Training

- 7,483 staff members trained since 2016 (both uniformed and non-uniformed)
 - 1,480 trained in calendar year 2016
 - 2,649 trained in calendar year 2017
 - 1,995 trained in calendar year 2018
 - 1,210 trained in calendar year 2019
 - 149 trained in calendar year 2020
- 1,119 incarcerated individuals trained since 2016
 - 54 trained in calendar year 2016
 - 47 trained in calendar year 2017
 - 646 trained in calendar year 2018
 - 372 trained in calendar year 2019
 - 0 trained in calendar year 2020

Mental Health First Aide (MHFA) training is a collaboration between the Department of Correction's Health Affairs Division and Correction Academy, with assistance from the Department of Health and Mental Hygiene (DOHMH). Together, the instructors provide MHFA training to recruits, officers, and incarcerated individuals, with the goal of providing information on how to recognize the signs of distress among incarcerated individuals who may be mentally ill. The Department initially focused on only training uniformed staff working in areas where they would encounter individuals with mental health issues but has since expanded the training to non-uniformed staff and incarcerated individuals.

Due to the current public health emergency, the Department suspended MHFA training for the safety of both members of staff and people in custody. In calendar year 2020, MHFA was only offered to 149 staff members and not to people in custody. MHFA training is projected to resume spring of 2021.

Crisis Intervention Team (CIT) Training

- 993 individuals trained between 2016 and 2020 (both DOC and H+H staff)
 - 246 trained in calendar year 2016
 - 193 trained in calendar year 2017
 - 302 trained in calendar year 2018

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- 228 trained in calendar year 2019
- 24 trained in calendar year 2020

Crisis Intervention Teams (CIT) training is designed to teach uniform and non-uniform staff members the common signs and symptoms of mental illness, and to recognize those signs and symptoms during a crisis situation. The goal of CITs are to improve the safety of both uniform and mental health staff and individuals with mental illness who come in contact with them. Instead of dispatching a tactical team to a crisis situation, an interagency (DOC & CHS) CIT respond and utilize verbal de-escalation skills to defuse a situation where an individual is experiencing a mental health crisis, ideally averting the need for use of force.

Due to the current public health emergency, only 24 staff members were trained in CIT prior to the Department suspending training for the safety of members of staff. The Department anticipates CIT training will resume in 2021.

Unit Management Training

- 766 staff members trained in 2020

The Department transitioned from Safe Crisis Management (SCM) training in November of 2019. In its place, the Department has instituted Unit Management (UM) as management practice. Before its discontinuation, 9,114 staff members were trained on SCM from calendar year 2014 through 2019. Unit Management (UM) is a nationally- recognized, evidence-based best practice for managing people in custody in correctional facilities (jails and prisons). The Academy began training members of staff on the practice in September 2020. The UM training module defines the roles and responsibilities of uniform and non-uniform personnel, who work side-by-side in the housing areas under the UM approach, placing a special emphasis on how their collaboration contributes toward a successful effort in improving facility operations. This course also provides training on restorative justice techniques that promote conversation and support conflict resolution.

An important element of UM is the individual case plans that will be developed for all new members of staff arriving in a housing area. The case plan defines what factors resulted in the person in custody arriving in our facilities and maps out interventions to help the individual engage in more pro-social behaviors. The interventions are individualized and can range from an anger management workshop, to on-going individualized counseling, to an academic or vocational program.

The Department's Trauma-informed Care Guidelines

The Department of Correction has worked extensively to incorporate mental health awareness training and to provide information on the impact of trauma on individuals across the Department. Trauma informed care is defined as an approach that acknowledges the impact of trauma on individuals. The steps for implementing a trauma informed approach are:

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1. Realizing the widespread impact of trauma and understanding the potential paths to recovery;
2. Recognizing the signs and symptoms of trauma;
3. Responding by fully integrating knowledge about trauma into Department policies, procedures, and practices, and;
4. Seeking to prevent re-traumatization.¹

Programs that Incorporate Trauma-Informed Care

Over the past five years, the Department has expanded programming that incorporates trauma-informed care. In 2020, the Division introduced a Case Management Model to promote correctional best practices through individualized needs-based services with plans to continue the rollout of this model to all persons in custody. As part of this process, incarcerated individuals are referred to programming based on their unique needs, including trauma-informed counseling groups. This year, the Division of Programs and Community Partnerships will be implementing a core program menu that includes trauma-focused groups using evidence-based curricula such as Seeking Safety, Beyond Trauma, and Exploring Trauma. These curricula focus on topics such as attaining safety from trauma or substance use, recovering from past trauma, and empowering an individual's future.

In addition, knowing that many incarcerated women have a history of trauma, the Executive Director of Women's Initiatives is leading the implementation of various programs and practices to help the women in our care heal and thrive. In collaboration with national experts and the Academy, we are developing a training on gender-responsive practices and trauma-informed care for all uniformed and non-uniformed staff who work in the women's facility. This training is expected to be implemented in 2021. To help incarcerated mothers overcome the trauma associated with being separated from their children, the Department has implemented programming that enable them to maintain and strengthen their relationships with children. In partnership with the Mayor's Office of Criminal Justice, the Osborne Association, and Hour Children, we offer the Family Visitation and Assistance Program, which provides incarcerated mothers and their families with support before, during, and after their visits with children. We have also worked with the National Institute of Corrections to develop a family engagement form to identify and address mothers' child-related needs through a variety of services, such as parenting classes and Beyond Trauma, a trauma-focused group designed specifically for women. This form is going to be introduced when the Department rollout the Case Management Model to all persons in custody.

The Department recognizes LGBTQ+ individuals in custody may have experienced trauma prior to their involvement in the criminal justice system and seeks to minimize further trauma while in our

¹ SAMHSA. (2018). Trauma-Informed Approach and Trauma-Specific Interventions. Retrieved from: <https://www.samhsa.gov/nctic/trauma-interventions>

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custody. The Department's Director of LGBTQ+ Initiatives has implemented a series of specialized programs and services to enable LGBTQ+ individuals to seek support to address their needs. LGBTQ people in custody now have direct access to a trained DOC staff member via a new LGBTQ+ hotline, which they can call from their housing area phones. This spring the Department is also establishing the Pride Ambassadors program, in which a group of volunteer staff members with additional specialized training will wear a visible symbol that makes clear they can be a safe resource for LGBTQ+ individuals. Through collaboration with DOHMH/Correctional Health Services and the Emergency Relief Fund, in April the Department will begin issuing pre-paid cellphones to LGBTQ+ people upon their release, enabling them to connect with reentry services that meet their needs immediately upon their discharge. Finally, the LGBTQ+ Team developed a comprehensive resource guide listing community-based organization that serve the LGBTQ+ community ensuring they can find a safe location to receive services upon discharge.

New Initiatives

The Department recognizes that trauma does not only impact individuals in custody, but staff as well. We are committed to supporting all who are impacted by trauma and are creating a support system to address those affected.

In April of 2021, the Department's Training Division plans to rollout a new "Recognizing Trauma" workshop for uniform and non-uniform personnel with the goal of establishing a shared departmental understanding of trauma, how trauma develops within the body, and how to identify signs indicating that someone might be experiencing stress or trauma.

The Department's Training Division and CARE Unit have developed a holistic approach to supporting employee health and wellness aligned with core correctional best practices. These practices focus on mental, physical, financial, and other areas of health and wellness. First step on this collaboration was producing a series of three (3) modules for supervisors and managers, both uniform and non-uniform, which address recognizing and addressing their own stress, as well as supporting staff in recognizing and addressing theirs. The modules were produced as online, self-paced so that the Department could roll them out via the new LMS (learning management system, online learning portal). This has now been rolled out to the targeted audience.

Connecting Persons in Custody & Members of Staff to Chaplaincy Services

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Congregant religious services were suspended in March 2020 in an effort to reduce the amount of physical exposure and movement through the facilities and mitigate the spread of COVID-19. As a result, the Chaplaincy Hotline was developed in March of 2020, which enables people in custody to keep in direct contact with chaplains and maintains their connection to spiritual support. This hotline continues to serve as a means for people in custody to connect with a chaplain to address religious/spiritual care needs, to request bereavement support, and to request vital support around the unique trauma associated with the COVID-19 pandemic.

The Chaplaincy Hotline has remained a valuable way of maintaining a line for communication and direct engagement at a time in which the impact of physical interaction with others might be experienced as traumatic. Throughout the pandemic many of our chaplains remained dedicated to touring facilities as well as engaging with people in custody via the chaplaincy hotline.

Members of staff can connect with chaplains in their facilities and/or call the Wellness Center, where spiritual, emotional, and psycho-social support is provided by DOC Wellness staff.

Connecting Persons in Custody & Members of Staff to Mental Health Services

Correctional Health Services (CHS), in partnership with the Department, have a Health Triage Line, previously known as the sick call phone line. Persons in custody can call the line from the housing area to speak directly with a CHS nurse between the hours of 5 a.m. and 12 p.m. or to leave a message. The CHS nurse addresses the caller's concerns, and, if necessary, the person in custody is placed on a sick call list to be produced to the clinic by the Department.

The Health Triage Line allows people in custody to speak directly with a CHS nurse to discuss mental health concerns; to schedule appointments (nursing, medical or mental health); to refill prescriptions; to request lab results; to ask about medications; and to ask about any health-related issue.

Conclusion

The Department remains committed to providing trauma informed care to those in our custody and to our staff. Addressing underlying trauma supports safer and healthier facilities and communities. We look forward to continuing these practices in the year to come.