

Justice Services Advisory Board Meeting Minutes

January 24, 2020

9:00 am

St. Louis County Government Administration Building

41 S. Central, 8th Floor Conference Room

Clayton, MO 63105

I. Roll Call: Rev. Duvall, Ms. Taylor, Ms. Schmidt, Mr. Smith and Dr. Garza were present.
Absent: Ms. Lee, Mr. McBride

II. Approval of Minutes
Rev. Duvall moved for approval of the minutes of the meeting of December 27, 2019.
Ms. Taylor seconded the motion.
The motion passed unanimously.

III. Opening by Director Banasco
Mr. Banasco shared with the Board that he was inviting members of the County Council as well as the Advisory Board members to join his executive leadership team for two hour sessions, in which there will be power point presentation of the various divisions within the Department, followed by a tour of all the areas of the jail as well as community corrections. These presentations will be done one at a time starting in mid-February.

Mr. Banasco reported that the population of the jail as of this morning is at 925 inmates.

Ms. Taylor asked about the staff numbers.

Mr. Banasco said that we have 9 new graduated Corrections Officers and 11 new hires currently in the Correction Officers academy training this week. He also informed the Board that the corrections academy was being extended a week for additional training. There are approximately 20 Correction Officer vacancies and we expect 3 or 4 employees to be retiring soon.

Mr. Smith asked if there is a region wide determination on whether someone is put behind bars or if they are in need of temporary housing.

Mr. Banasco said he would follow up on this, that there is some variance in number of inmates, and that may be based on the weather, and on number of warrants.

Rev. Duvall asked how many Captains there are.

Mr. Banasco said that 4 will be retiring, however Human Resources is allowing a two week overlap of hiring before the retiring employee's last day.

Gen. Frank stated that is something the Civil Service is looking at succession in hiring countywide.

Mr. Banasco gave an update on training efforts within the department such as providing training on transportation restraints methods to all department corrections officers as all of them might be needed to conduct transports of inmates so this training is important. He also stated that all

Case Managers across the department will be provided with additional training as it relates to the job duties.

There will be a survey for the upcoming year to identify most needed for additional training, including dealing with addiction/medical concerns.

Rev. Duvall asked what the current yearly training for current officers consists of. Mr. Banasco stated that annual in-service training is 40 hours, 16 hours of in class training and 24 hours on line.

Dr. Garza asked about national standards and requirements. Mr. Banasco said there are modules on different topics, however there are no state set training requirements. He has seen facilities that do all training in class only, however we do not have the staff numbers that would allow that. The ACA national standards require 40 hours of in-service training each year.

Dr. Garza asked whether specific topics are needed. Mr. Banasco said that just the key subjects to be included in the training. ACA also gives examples of the topics to include.

Dr. Garza would like to see a one page summary on the training that is used.

Mr. Smith asked about whether there are training updates on substance abuse and the newer drugs that are out there now.

Mr. Banasco said the officers do try to keep themselves current on such topics via on line training opportunities.

IV. Patient Safety Updates

Dr. Doucette asked Valerie for input, Ms. Nelson stated that they are formalizing how employees speak about patient safety issues and using better choice of words. There is now a formal communication path which is successfully increasing awareness throughout the department and enabling all colleagues to alert leadership when they consider something in their work to be a risk to patient safety. Each reported risk is evaluated, prioritized, and researched; leading to a specific action to address the root cause. Ms. Nelson has had conversations with Ms. Taylor on additional structuring improving communication with the community over concerns in the jail.

There is also now an in-service program where they are cycling through different topics relevant to delivering care in our environment.

They also established a joint operations committee where Justice Services and Corrections Medicine staff talk through the daily issues that often occur when the delivery of healthcare meets inmate security and how they can be addressed with systemic solutions.

Ms. Taylor gave the suggestion that this should be on joint operations and not only on medical concerns. She expressed that there is the beginning of the structure of defining the improvement and that first it needs to be determined what is needed and prioritized from previous cases.

Mary Taylor felt that Dr. Garza should be involved in the discussion.

Dr Garza added that it would be appropriate for patient safety to have a strategic plan and. And I asked that he be certainly involved in that.

Ms. Nelson stated that they are structuring processes that are already in place, yet disjointed and needing more consistency and structure.

Ms. Taylor stated that the communication between the Director and the Advisory Board should improve related to serious events, in order for the Board to fulfill their duties.

Ms. Taylor stated they are treated separate and did not get the incident report.

Rev. Duvall asked Mr. Banasco what the process is when a Corrections Officer observes an inmate that is sick.

Mr. Banasco said that the Officers do periodic checks on inmates and if someone is observed to be sick then medical is contacted, medical personnel respond and decide if the patient needs to be observed more closely, moved to the infirmary or sent to the hospital. Most contact is by phone calls that are logged but not recorded. Also, all periodic inmate checks are logged.

Mr. Banasco referenced a potential enhanced communication system and will provide additional details at a later date. Ms. Schmidt says it is through training and communication that employees can see why all parts of a policy or procedure are in place and why all parts are necessary.

Ms. Taylor explained that the story telling aspect of a procedure adds the human element and that the right people are needed to redesign a policy.

Rev. Duvall brought up the process on death and that the policy was followed and was reviewed by Superintendent Howard and Internal Affairs.

Ms. Taylor said that moving forward a timeline is needed on the total event ~~total event~~. Ms.

Taylor stated, "***I am also concerned*** that some are confusing investigating this case **through a negligence lens and causation with doing a process analysis**. Was this preventable?" It is important to look at the legacy that the 5 inmate's deaths left behind. What are the weaknesses and the strengths in the current process? Changes in policy will not help those individuals, however it may make a difference to someone in the future if there are updated now.

Mr. Smith stated that on the 27th they got a report but then conflicting information came up, there were questions from the community, however the Board was not able to respond.

Dr. Garza stated it is important to prevent the next occurrence by changing the process followed. How is information transmitted to the public; communication has been disjointed, for high profile activity we need a better process.

Rev. Duvall read a letter dated January 18, 2020 from Dr. McBride where he stated:

"I still have not received a copy of the internal report, nor have I been briefed on it. It still amazes me that the Post-Dispatch has seen a copy of the report before at least this board member has. ... It is difficult, if not impossible, for me to do the work we have been asked to do ... without full transparency and information." Rev. Duval said that the board believes in transparency and that with our cultural/regional issues, we need to speak the truth. He feels that the County Counselor's office is problematic in getting information out and that the truth will come out eventually, so the facts should be told now. The Board is only trying to fix the communication, and physical meeting rather than emailing communication is needed. He thanked Dr. Doucette for meeting with the family. He begged everyone to improve the policy, to fix what is wrong, that death can't be stopped, however we need to hold each other accountable and be transparent.

Ms. Taylor asked what is going to be different after today.

Mr. Banasco asked the Board to be a part of the process in determining what is beneficial to change in the process.

Ms. Taylor asked what in our minutes will be added about the changes we are going to make, and going forward how is this going to serve as change.

It was asked what are the dates, decisions, when are reports going to be finalized, and then what recommendations will there be.

It was determined that 30 days may not be reasonable, between the Medical Examiner's report, the Police report and internal reports that need to be completed. We need to have language in place on a policy of a timeline in these situations.

It was decided to schedule a meeting to discuss the final report and recommendations, and that perhaps it should be a closed session.

It was stated that the information should be "out there" and it should be an open session because we are discussing a "process".

Ms. Frank stated that the County Counselor's Office would advise they consult with the Director to determine if the report contained any information that is closed by law.

It was discussed that Internal Affairs is separate from the medical report, and that what is needed is a report that covers both areas without including names/or HIPAA information to look at the process with transparency.

Dr. Garza said the policy needs to have more guidelines on timing to follow.

V. Community Process for Communication

It was discussed that Tashonda Troupe had to send Ms. Taylor a message that then was forwarded to Dr. Doucette and Director Banasco. When families or friends call with a concern, there needs to be a system that closes the loop on communication so that someone calls them back and tells them what they found, or reminds them if the information is confidential. In any circumstance, they should get a call back.

Director Banasco said there is always an opportunity to improve communication with the public.

Mr. Smith asked who would most be like be like an ombudsman.

Director Banasco said it would be himself.

Mr. Smith said that a public information person is needed, perhaps to be put in the next year budget for a person in that type of position.

Director Banasco said that is a subject to follow up on.

VI. New Business

Dr. Garza asked Dr. Doucette when their data will be in, she answered that starting in February they will have information available. He stated there should be data on operations also, that should be presented each month.

Rev. Duvall asked about the new phone service. It was noted that additional details could be provided about this at a later date.

Ms. Taylor said that the new Officer graduation was very good.

VII. Visitors

Ms. Breihan addressed the board and shared her opinion on the information provided on deaths that have occurred.

Ms. Zorich addressed the board and inquired about the new phones

Ms. Troupe addressed the board and expressed her opinion on the topic of the inmate deaths and accountability and transparency of the details.

VIII. Next Board Meeting is tentatively scheduled for February 28th at 9:00 in the 8th floor conference room at LK Roos Building.

IX. Moved, seconded and passed unanimously to adjourn the meeting at 10:33 a.m.

Commented [FG1]: If you know who made and seconded the motion, please add that.