

Correctional Health Services Progress Report

May 2016

OVERVIEW

NYC Health + Hospitals' mission to provide equally to all New Yorkers safe, quality, affordable care extends to the men and women in the city's jails.

As part of the de Blasio administration's commitment to reform the city's correctional system, the Mayor, in June of 2015, announced that the management of inmates' health services would move to NYC Health + Hospitals and the City would be ending its relationship with Corizon, Inc., the for-profit company that previously operated health services in the jails. The complete transition, which included a new governance structure and the transfer of 1,500 employees, took effect January 1, 2016, with no lapses in coverage and no disruptions in patient care.

During this time, the public health system's Correctional Health Services (CHS) team has built a framework that improves the city's ability to achieve two main goals for incarcerated persons: increase the quality of and access to care while reducing the challenges to and demands on correction security staff; and improve continuity of care during and after incarceration.

This Progress Report details the strategic improvements that have been made since NYC Health + Hospitals became responsible for Correctional Health Services and how the CHS team will continue to provide enhanced care for one of the City's most vulnerable populations to:

- + Build a mission driven, skilled and engaged workforce
- + Improve operations and organizational structure
- + Ensure safety for patients and staff
- + Improve continuity and access to care
- Leverage NYC Health + Hospitals programs and services
- + Expand successful program and services

NYC Health + Hospitals Correctional Health Services Strategic Improvements

"We took on the critical task of managing the city's correctional health services with a clear resolve to bring equity and improve quality of care to the approximately 55,000 men and women who move through the system every year. We have now built one unified correctional health team of experts who are uniquely focused on transforming the delivery of health care in our city's jails."

DR. RAM RAJU

PRESIDENT AND CEO, NYC HEALTH + HOSPITALS

BUILD A MISSION DRIVEN, SKILLED, ENGAGED WORKFORCE

- Appointed new administrative, clinical and front line staff with strong backgrounds in medical, mental health, and social work services who have devoted their professional careers to working in the field of correctional health. New positions include:
 - + Sr. Director of Operations to overhaul every aspect of operations and support provision of clinical care
 - + Addiction Medicine physician to coordinate and innovate the most extensive substance abuse service program in a US jail system
 - + Sr. Director of Clinical Quality Improvement to focus on quality assurance (QA) and integrate into the existing, robust QA process at NYC Health + Hospitals
 - + Correctional Health Services Safety Officer
 to work in coordination with the NY Health +
 Hospitals, the Department of Corrections, and
 labor partners and ensure a safe environment for
 patients and staff
 - + Director of Clinical Education to build a comprehensive staff training program that ensures community standards of care inside the jail system
 - + A medical expert in geriatric and palliative care - to ensure best practices in the care of elderly inmates who don't require hospitalization

- + A nursery coordinator to ensure every pregnant woman in the Rose M. Singer Center jail receives high quality, pre-natal care.
- 2. Expanded employee education and training program by establishing medical and mental health grand rounds and broadening collaborations with academic partners.

IMPROVE OPERATIONS AND ORGANIZATIONAL STRUCTURE

- Created a new Operations Department to set new standards and develop a new service infrastructure to improve accountability, productivity and increase safety.
- Established a new Policy & Planning
 Department to coordinate incident and complaint investigations, promptly respond to all patient requests, and oversee data reporting and analysis.
- 3. Established an unprecedented level of coordination through new daily, weekly and monthly meeting with senior Department of Correction staff and NYC Health + Hospitals correctional health team to plan, problem solve, and discuss the most pressing issues surrounding challenging patients, safety and patient production.
- Centralizing substance use treatment programs to help optimize quality and effectiveness of programs.
- Integrated mental health and discharge planning staffs into one professional psychiatric social work service to enhance connections with community agencies and improve the quality of discharge services.
- 6. Built a new in-house system of employee review and tracking to ensure that all 1,500 people working in CHS have the requisite credentials, licenses and security clearances to ensure every individual worker is qualified for the job.

ENHANCE SAFETY FOR PATIENTS AND STAFF

1. Conducted first-ever safety survey of every clinical space in the jail system to create a baseline for necessary improvements.

- Convened pioneering new Workplace Safety
 Committee comprised of the four health
 unions (NYSNA, Doctor's Council, 1199, DC37),
 Correction Officers' Benevolent Association,
 DOC, and Correctional Health Services staff
 who will meet regularly to identify concerns and
 help ensure a safer work environment.
- Established the Joint Assessment and Review process to foster better coordination with DOC when there are significant incidents that affect staff, patients and facilities.

IMPROVE CONTINUITY AND ACCESS TO CARE

- Launched the first-ever Telehealth pilot within NYC Health + Hospitals that expands access to NYC Health + Hospitals/Belleuve physicians via audio-visual technology and reduces costly travel time for hospital-based specialty consults.
- Established a new a support group for sentenced patients with mental health needs to provide opportunity to discuss challenges they may face as they reenter the community, learn how to identify triggers and develop coping mechanisms to support positive change after they leave jail.
- 3. Created new "one-stop" assistance center to link patients and families to health care services in their community. The new Assistance Center will open June 1, 2016 and will be staffed by NYC Health + Hospitals' Correctional Health Services Reentry & Continuity Services team, MetroPlus health plan, the Gotham Health network of community-based health centers, and the Health Home program that offers individualized care coordination services.

"Although the challenges of the transfer to NYC
Health + Hospitals were complex, we did not want
to miss an opportunity to begin building a
framework for the new, improved approach to care
for our patients in jail. I'm proud of all the work we
have done in such a short time and I am confident
that CHS will continue to be a leader in how health
care is delivered to incarcerated persons."

DR. PATSY YANG

SENIOR VICE PRESIDENT, NYC HEALTH + HOSPITALS CORRECTIONAL HEALTH SERVICES

LEVERAGE NYC HEALTH + HOSPITALS PROGRAMS AND SERVICES

- Established a new enrollment station for NYC
 Health + Hospitals' MetroPlus Health Plan at
 the Benjamin Ward Visit Center to help sign up
 patients and families to health insurance.
- Created new linkages to community-based health center teams. Upon release from jail, patients are connected to a NYC Health + Hospital Gotham Health Center location that's accessible to them.
- 3. Offer care coordination to patients with multiple medical and mental health needs. Upon release, eligible patients are now connected to the NYC Health + Hospitals Health Home program to get help scheduling doctor's appointments, managing chronic health conditions, and accessing social services.

EXPAND SUCCESSFUL PROGRAMS AND SERVICES

- Will open two additional Program for Accelerating Clinical Effectiveness (PACE) units each year for the next four years to care for seriously mentally ill with \$2.1 million in FY17, ramping up to \$10.2 million by FY20.
- 2. Will expand from one shift to 24/7 coverage to conduct health screening and assessments for medical and mental health issues at the Manhattan Detention Center with \$2.7 million in FY17 and each year thereafter.
- 3. Will expand provision of a drug regimen that cures Hepatitis C with \$2.5 million in FY17, ramping up to \$5 million in the following years.
- 4. Will open more mini-clinics near jail housing areas to bring health services closer to where people are with \$1.2 million in capital funding.
- 5. Will expand the Telehealth pilot to increase access to care and reduce the need for disruptive patient transportation with \$650,000 in capital funding. Will expand to include more services at NYC Health + Hospitals/Bellevue and NYC Health + Hospitals/Elmhurst.

Correctional Health Services Facts and Figures

The NYC Health + Hospitals Correctional Health Services is one of the largest in the United States with 12 jails citywide, nine of them on Rikers Island.

Employees: Approximately 1,500 mission-driven doctors, nurses, psychiatrists, psychologists, therapists, physician assistants, social workers, administrative professionals, and support staff.

Annual Budget: \$235 Million in FY16

Patient Population: Approximately 55,000 patients move through the system every year.

Gender

- + 89 percent of jail admissions are male
- + 11 percent of jail admissions are female

Race

- + 54 percent are non-Hispanic black
- + 33 percent are Hispanic
- + 9 percent are non-Hispanic white

Age

+ The average inmate age is 34

Average Length of Stay

+ 55 days

Clinical Encounters (CY15)

+ Mental Health Encounters: 280,000

+ Medical Encounters: 547,000

+ Dental Encounters: 20,000

+ Total Encounters: 847,000

Chronic Disease and Risk Factors

- + 59 percent are current smokers
- + 23 percent have asthma
- + 13 percent have a Body Mass Index greater than 30
- + 12 percent have hypertension

Mental Health

- + 43 percent of the jail population is being treated in the mental health service
- + 11 percent are diagnosed with a serious mental illness

Substance Abuse

+ 48 percent self-report substance abuse upon admission

HIV

+ 3.8 percent self-report HIV upon admission



