



## PRISONERS' LEGAL SERVICES OF MASSACHUSETTS

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January 12, 2018

### **Proposed actions on solitary confinement/restrictive housing**

PLS supports the adoption of the restrictive housing language in S. 2200. However, a number of important provisions are missing from this language in S. 2200. Some of these were included in H. 4043. We strongly urge the committee to adopt the following:

- Requirements that prisoners be transitioned out of segregation in the period before scheduled release to the community. Such provisions are included in H. 4043.
- The establishment of an oversight committee and data collection. H. 4043 recognizes that an oversight body is crucial to ensuring that solitary is being appropriately limited. Unlike S. 2200, H. 4043 requires that incidents of self-harm and suicide in solitary are reported.
- An informed definition of serious mental illness is necessary to ensure that those who are significantly mentally impaired have the opportunity to be screened out of solitary confinement. A definition of serious mental illness is absent in S. 2200.

PLS additionally urges that the language in S. 2200 requiring that prisoners in restrictive housing have “access to vocational, educational and rehabilitative programs to the extent consistent with the safety and security of the unit,” and providing for good time, be amended to add the following minimal requirements:

Out-of-cell programming and/or activities must be provided to each restrictive housing prisoner for a minimum of 2 hours a day at least 5 days a week unless the Superintendent or his/her designee certify in writing that, with regard to the individual prisoner, such out-of-cell programming would be inconsistent with the safety and security of the unit. In such circumstances, the Superintendent shall make all efforts to provide comparable in-cell programming or other activities to the prisoner.

### **Medical Release**

PLS supports the provisions in S. 2200 addressing the medical release of certain prisoners deemed to be medically and permanently incapacitated, and whose care is financially taxing on the correctional system. The provisions in the bill provide for a reasonably streamlined and efficient process that is not administratively cumbersome. However, PLS urges the conference

committee to consider amending one area. S. 2200 requires that the Commissioner be the final decision maker on medical release cases from county facilities as well as for the DOC. This would add an additional level of decision making and delay to the process at the county level. Further, the Sheriffs of the respective counties, like the Commissioner, are better positioned to assess the merits for release of a given prisoner in their jurisdiction. PLS therefore urges that the provisions be changed to allow the Sheriffs to be the final decision makers on medical release cases in their jurisdiction.

### **Medication Assisted Treatment (MAT)**

PLS urges the Conference Committee to support sections 174 and 330 and of S. 2200 and Sections 145 and 224A of H. 4043. These provisions establish medication assisted treatment pilot projects in a number of state and county facilities, which are well-designed, evidence-based and proven to be effective in saving lives.

### **Prison Phone Rates**

Section 135 of H. 4043 would require the DOC and Department of Telecommunication and Cable to study the issue of Prison Telephone Rates and report on their findings. Prison phone rates are unnecessarily high and grossly inflated by kickbacks paid by the prison phone company to the facility as an incentive for securing the exclusive contract. These kickbacks can effectively double the price of calls for prisoners and their families making phone communication and maintaining family ties while incarcerated cost-prohibitive, in addition to sapping scarce resources from already struggling low-income families. The outrageously high cost of these calls also negatively impacts successful reentry, which is positively correlated with maintaining family ties while incarcerated. This provision will help further debate regarding the importance of lowering prison phone rates for MA residents.

### **Treatment of Transgender Prisoners**

Only S. 2200 contains provisions recognizing the unfair barriers and lack of safety uniquely faced by transgender prisoners. PLS urges support of three specific provisions in S. 2200: 1) Section 39A(c), which would prohibit placement of LGBTQI prisoners in restrictive housing solely on the basis of their gender identity or sexual orientation, 2) Section 339 would wisely establish a commission to study the health and safety of LGBTQI prisoners, and 3) Section 117B, which would provide improved access to treatment and appropriate diagnoses for transgender prisoners.