



STATE OF NEW YORK • EXECUTIVE DEPARTMENT  
**STATE COMMISSION OF CORRECTION**  
 Alfred E. Smith State Office Building  
 80 S. Swan Street, 12th Floor  
 Albany, New York 12210-8001  
 (518) 485-2346  
 FAX (518) 485-2467

CHAIRMAN  
 Thomas A. Beilein

COMMISSIONERS  
 Phyllis Harrison-Ross, M.D.  
 Thomas J. Loughren

**MINUTES**

**LOCATION:**

**STATE COMMISSION OF CORRECTION**  
**Alfred E. Smith State Office Building**  
**80 So. Swan Street, 12<sup>th</sup> Floor**  
**Albany, New York 12210-8001**

**DATE OF MEETING: September 17, 2013**

Chairman Beilein called the meeting to order at 11am.

**PRESENT:**

Thomas A. Beilein, Chairman  
 Phyllis Harrison-Ross M.D., Commissioner  
 Thomas J. Loughren, Commissioner  
 Brian Callahan, Acting Counsel  
 Jim Lawrence, Director of Operations  
 Rich Kinney, CFS III  
 Tricia Amati, Assistant to Chairman/Commissioners  
 Peggy Loffredo, Forensic Unit, Supervisor  
 Terry Moran, Capital West, Supervisor  
 Bill Benjamin, Hudson Lakes, Supervisor  
 Steve Savoy, South Central, Supervisor  
 Bob Cuttita, CFS II  
 Walter McClure, Deputy Director of Public Information  
 New York State Division of Criminal Justice Services

**I. MINUTES**

<b>SCOC</b> August 13, 2013	<b>Approved Unanimous</b> <b>Loughren/Ross</b>
<b>CPCRC</b> September 12, 2013	<b>Approved Unanimous</b> <b>Loughren/Ross</b>
<b>MRB</b> Administrative Closures	<b>Approved Unanimous</b> <b>Ross/Loughren</b>
September 5, 2013 Minutes	<b>Approved Unanimous</b> <b>Ross/Loughren</b>

## II. VARIANCES

- A. **Cortland County Jail** Approved Unanimous  
96-V-26 Six (6) Months  
(Section 7040.3 Facility Population Limitation) Loughren/Ross
- B. **Cortland County Jail** Approved Unanimous  
96-V-29 Six (6) Months  
(Section 7040.3 Facility Population Limitation) Ross/Loughren
- C. **Niagara County Jail** Approved Unanimous  
97-V-18 One (1) Year  
(Section 7040.3 Facility Population Limitation) Loughren/Ross

## III. MFC

- D. **Monroe County Sheriff's Office-PSB** Deny Unanimous  
MFC Formulation Request Loughren/Ross  
(\*\*Existing MFC Stands  
Approved)

## IV. Construction

- E. **New York City Department of Correction** Approved Unanimous  
**Manhattan Detention Center (MDC)** Ross/Loughren  
Renovation of Cell Doors, TV Shelf and  
Recreation Area 1<sup>th</sup> Floor
- F. **NYS University Police** Approved Unanimous  
**SUNY Purchase College** Ross/Loughren  
New Police Lockup
- G. **Rockland County Jail** Approved Unanimous  
Removal and replacement of perimeter fence Ross/Loughren  
and detection system

## V. REGULATORY REFORM

- H. **Notice of Adoption** Approved Unanimous  
Amendment of Sections 7002.2(a) and 7205.2(c) Loughren/Ross  
of Title 9 NYCRR (Approve to Adopt)

Commissioner Ross made a motion to go into executive session at 11:15am to discuss Construction and MRB items, which was seconded by Commissioner Loughren.

Commissioner Loughren made a motion to exit Executive Session and return to general session at 12:15am, which was seconded by Commissioner Ross.

The meeting resumed at 12:16pm. Motion was made by Commissioner Ross to ratify actions taken in Executive Session regarding MRB and Construction items, seconded by Commissioner Loughren and approved.

Commissioner Ross made a motion to adjourn at 12:18pm, which was seconded by Commissioner Loughren.

Respectfully submitted,

Tricia Amati  
Assistant to Chairman/Commissioners



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(518) 485-2346  
FAX (518) 485-2467

CHAIRMAN  
Thomas A. Beilein

COMMISSIONERS  
Phyllis Harrison-Ross, M.D.  
Thomas J. Loughren

## EXECUTIVE SESSION

**LOCATION:**  
**STATE COMMISSION OF CORRECTION**  
**Alfred E. Smith State Office Building**  
**80 So. Swan Street, 12<sup>th</sup> Floor**  
**Albany, New York 12210-8001**

**DATE OF MEETING: September 17, 2013**

**PRESENT:**

Thomas A. Beilein, Chairman  
Phyllis Harrison-Ross M.D., Commissioner  
Thomas J. Loughren, Commissioner  
Brian Callahan, Acting Counsel  
Jim Lawrence, Director of Operations  
Rich Kinney, CFS III  
Tricia Amati, Assistant to Chairman/Commissioners  
Peggy Loffredo, Forensic Unit, Supervisor  
Terry Moran, Capital West, Supervisor  
Bill Benjamin, Hudson Lakes, Supervisor  
Steve Savoy, South Central, Supervisor  
Bob Cuttita, CFS II  
Walter McClure, Deputy Director of Public Information  
New York State Division of Criminal Justice Services

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Respectfully submitted,

Tricia Amati  
Assistant to Chairman/Commissioners

Name of Facility: Putnam County

Variance # 08-V-08

New:  Renewal: 

Relief from Standard: 7040

Application by: Sheriff Donald Smith

Date Request Rec: 09/2013

Last Approved: 06/2012

Length of Approval: 4 Months

Expiration: 11/1/2013

Write-up Prepared by: Elisha Hamilton

Recommendation by Field Staff: Approve

Recommendation at Briefing:

Final Recommendation:

**SUMMARY OF VARIANCE REQUEST**

Sheriff Smith is requesting an extension of this variance which authorizes the county to house an additional four (4) inmates in the day space of the North Housing Unit. This allows the facility to have an area to house inmates in the event of local population spike.

**VARIANCE HISTORY**

2013	Recommendation: Action Taken Length of variance Conditions, if changed	Approval Approved at 06/13 meeting 4 Months
2012	Recommendation: Action Taken Length of variance Conditions, if changed	Approval Approved at 11/12 meeting 6 Months
2011	Recommendation: Action Taken Length of variance Conditions, if changed	Approval Approved at 11/11 meeting 1 year
2010	Recommendation: Action Taken Length of variance Conditions, if changed	Approval Approved at 11/10 meeting 1 year
2009	Recommendation: Action Taken Length of variance Conditions, if changed	Approval Approved at 11/09 meeting 1 year

**CONSTRUCTION/RENOVATION PLANS**

The County is currently working to make subdivisions in facility housing units in order to rectify

the current classification violations. Plans will be submitted to the Commission for approval.

**OTHER VARIANCES IN EFFECT**

03-V-01

**STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):**

8/23/2013

**DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:**

8/19/2012

**ANY OPEN MINIMUM STANDARD VIOLATIONS:**

Inmates are not consistently separated by their classification designation.

**ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:**

None

**JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:**

This allows the facility to have overflow housing if they experience a spike in their local population. Commission staff are recommending approval for a period of 6 months. This will allow Commission staff to continue working with the county to become compliant with Part 7013, Classification.

**RECOMMENDED CONDITIONS IF APPROVED**

1. The county would be authorized to house an additional (4) inmates in the North housing unit 2.

Housing unit	MFC	Increase	Total
North Housing 2	4	4	8

2. Inmates housed in the above-noted areas must be provided with a bunk to be used as a bed.

3. "Active supervision" must be provided on a 24-hour basis, pursuant to 9NYCRR Section 7003.2(c) when inmates are housed in any of the above noted areas.

4. Inmates housed in these areas received the same services and programs as the general population.

5. The county shall not exceed the rated MFC for the purpose of boarding inmates. The Commission does not approve variances for the purpose of generating revenue.

REVIEWED BY REGIONAL SUPERVISOR:



DATE:

9/23/13  
10/7/13

**OFFICIAL USE ONLY:**

NOTES OF MEETING: \_\_\_\_\_



**New York State  
Commission of Correction  
80 Wolf Road  
Albany, New York 12205  
518-485-2465  
518-485-2467 (Fax)**

New	_____
Renewal	_____
Variance #	_____
(SCOC USE ONLY)	

**Thomas A. Beilein  
Chairman**

**Variance Application Form**

**INSTRUCTIONS TO SHERIFF OR CHIEF ADMINISTRATIVE OFFICER:**

Pursuant to New York State Minimum Standards Part 7050, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/Commissioner to the address or fax number listed above.

Facility: Putnam County Correctional Facility

Person requesting: Donald B. Smith

(Sheriff/Chief Administrative Officer)

- A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7040.3 states that, the total number of inmates confined within each correctional facility shall not exceed the maximum facility capacity of such facility. To request a variance to house additional inmates within the facility the citation should be listed as:

Ex. Part: 7040 Section: 3 Subdivision: n/a

Standard for which the variance is requested:

Part: 7040 Section: 3 Subdivision: n/a

- B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation) No alternative has been found within the Correctional Facility. The opening of an un-staffed housing unit, on overtime, for the housing of overflow inmates is the only option in short term prior to finding other suitable housing. The latitude to have a flexible housing alternative in the Correctional Facility, during non business hours, would greatly enhance the ability to maintain the proper security and supervision of the inmate population.

C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation) The female and male inmate average daily population (ADP) has fluctuated over the past year. During the past year, the populations have remained at 12 and 102 respectively. This additional bed space would allow for the latitude and flexibility to manage the fluctuation of inmates. The cost of boarding out inmates will continue to cause a financial hardship on the county budget.

D. Provide the amount of time for which the variance is requested, if applicable:

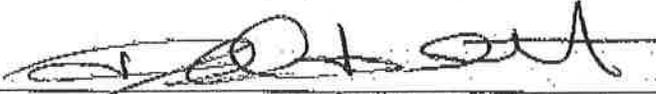
\_\_\_\_\_ Days      \_\_\_\_\_ Weeks      12 Months

E. If this variance request is approved, what plans, provisions and timetables are in place for achieving full compliance with the Minimum Standard at issue such as adding to the MFC, etc. (Use additional sheets to provide additional supporting documentation, if necessary). Reassign inmate housing and evaluate the feasibility of short term boarding out of inmates, continue dialogue with the County Highways and Facilities, County Executive and the New York State Commission of Corrections.



G. Has this variance been previously approved?

Yes X If yes, include the variance number \_\_\_\_\_ No 08-V-08

  
SHERIFF

Signature (Sheriff) (Chief Administrative Officer)

Date

09/24/13

**Additional copies of this form can be obtained by contacting the Commission, or online at [www.scoc.state.ny.us](http://www.scoc.state.ny.us). Click on table of contents, Commission Forms, Request for a Variance (Formal application statement).**



Name of Facility: Putnam County Jail

Variance # 03-V-01

New:  Renewal: 

Relief from Standard: 7040

Application by: Sheriff Donald Smith

Date Request Rec: 4/2013

Last Approved: 06/2012

Length of Approval: 4 Months

Expiration: 11/01/2013

Write-up Prepared by: Steve Savoy

Recommendation by Field Staff: Approve

Recommendation at Briefing:

Final Recommendation:

**SUMMARY OF VARIANCE REQUEST**

Sheriff Smith is requesting an extension of this variance which authorizes the county to house an additional four (4) female inmates in the day space of the South Housing Unit. This is a continuation from a previous variance.

**VARIANCE HISTORY**

2013	Recommendation:	Approval
	Action Taken	Approved at 06/13 meeting
	Length of variance	4 Months
	Conditions, if changed	
2012	Recommendation:	Approval
	Action Taken	Approved at 11/12 meeting
	Length of variance	6 Months
	Conditions, if changed	
2011	Recommendation:	Approval
	Action Taken	Approved at 11/11 meeting
	Length of variance	1 year
	Conditions, if changed	
2010	Recommendation:	Approval
	Action Taken	Approved at 11/10 meeting
	Length of variance	1 year
	Conditions, if changed	
2009	Recommendation:	Approval
	Action Taken	Approved at 11/09 meeting
	Length of variance	1 year
	Conditions, if changed	
2008	Recommendation	Approval
	Action Taken	Approved at 11/08 meeting
	Length of Variance	1 year
	Conditions, if changed	

SCOC VARIANCE WRITE-UP FORM: EFFECTIVE JANUARY 2010

2007	Recommendation	None
	Action Taken	
	Length of Variance	
	Conditions, if changed	
2006	Recommendation	Approval
	Action Taken	Approved at 7/06 Meeting
	Length of Variance	1 year
	Conditions, if changed	
2005	Recommendation	Approval
	Action Taken	Approved at 7/05 Meeting
	Length of Variance	1 year
	Conditions, if changed	
2004 -	Recommendation	Approval
	Action Taken	Approved at 07/13/04 Meeting
	Length of Variance	1 year
	Conditions, if changed	from first variance: SAME
2003 -	Recommendation	Approval
	Action Taken	Approved at 07/15/03
	Length of Variance	1-year
	Conditions, if changed	from first variance: SAME
2003 -	Recommendation	Approval
	Action Taken	Approved at 01/14/03
	Length of Variance	6 months

**CONSTRUCTION/RENOVATION PLANS**

The County is currently working to make subdivisions in facility housing units in order to rectify the current classification violations. Plans will be submitted to the Commission for approval.

**OTHER VARIANCES IN EFFECT**

08-V-08

**STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):**

8/23/2013

**DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:**

8/30/2012

**ANY OPEN MINIMUM STANDARD VIOLATIONS:**

Inmates are not consistently separated by their classification designation.

**ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:**

None

**JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:**

This allows the facility to have overflow housing if they experience a spike in their local population. Commission staff are recommending approval for a period of 6 months. This will allow Commission staff to continue working with the county to become compliant with Part 7013, Classification:

**RECOMMENDED CONDITIONS IF APPROVED**

1. The county would be authorized to house an additional four (4) female inmates in the dayspace of the South Housing Unit.

Housing Area	MFC	Increase	Total
South Housing Unit	4	4	8

2. The facility would be allowed to house four (4) inmates in the day space of the South Housing Unit.

3. Inmates housed in the above-noted areas must be provided with a bunk to be used as a bed.

4. "Active supervision" must be provided on a 24-hour basis, pursuant to 9NYCRR Section 7003.2(c) when inmates are housed in any of the above noted areas.

5. Inmates housed in these areas receive the same services and programs as the general population.

REVIEWED BY REGIONAL SUPERVISOR:

*[Handwritten Signature]*

DATE:

*9/23/13*  
*10/15/13*

**OFFICIAL USE ONLY:**

NOTES OF MEETING: \_\_\_\_\_



New York State  
Commission of Correction  
80 Wolf Road  
Albany, New York 12205  
518-485-2465  
518-485-2467 (Fax)

New	_____
Renewal	_____
Variance #	_____
(SCOC USE ONLY)	

**Thomas A. Beilein**  
**Chairman**

**Variance Application Form**

**INSTRUCTIONS TO SHERIFF OR CHIEF ADMINISTRATIVE OFFICER:**

Pursuant to New York State Minimum Standards Part 7050, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/Commissioner to the address or fax number listed above.

Facility: Putnam County Correctional Facility

Person requesting: Donald B. Smith

(Sheriff/Chief Administrative Officer)

A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7040.3 states that, the total number of inmates confined within each correctional facility shall not exceed the maximum facility capacity of such facility. To request a variance to house additional inmates within the facility the citation should be listed as:

Ex. Part: 7040 Section: 3 Subdivision: n/a

Standard for which the variance is requested:

Part: 7040 Section: 3 Subdivision: \_\_\_\_\_

B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation) The alternative for the housing of female inmates within the Correctional Facility is the opening of a second housing unit which requires overtime. This option is not feasible, for long term housing, due to the cost of supervision of the housing unit on an overtime basis. Furthermore, this would increase the number of housing unit assignments and further burden the staff with forced overtime. This second housing unit would, at times, be operational for only one or two female inmates, at an overtime cost, as a temporary solution.

C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation. The female inmate average daily population has been 12 during 2013. However, during the recent past, the average daily population has fluctuated between 12 and 25. This increase has had a significant impact on the operations of the unit as the female housing unit is only comprised of eight cells. Additionally, when there is a minor female inmate housed in the unit, the available cells for adult females is further reduced. The cost of boarding out female inmates continues to increase and impact the county budget.

D. Provide the amount of time for which the variance is requested, if applicable:

\_\_\_\_\_ Days      \_\_\_\_\_ Weeks      12 \_\_\_\_\_ Months

E. If this variance request is approved, what plans, provisions and timetables are in place for achieving full compliance with the Minimum Standard at issue such as adding to the MFC, etc. (Use additional sheets to provide additional supporting documentation, if necessary). The renovation and expansion of the female housing unit is under review. There has been recent dialogue with an architect in developing and revising plans that are compatible with the footprint of the Correctional Facility property. In addition, to aforementioned, there has also been recent dialogue with the County Highway and Facilities Department, the Putnam County Sheriff's Department and the New York State Commission of Corrections regarding subdivisions of existing housing units.



G. Has this variance been previously approved?

Yes   X   If yes, include the variance number \_\_\_\_\_ No 03-V-01

  
\_\_\_\_\_  
SHERIFF  
Signature (Sheriff) (Chief Administrative Officer)

September 23, 2013

Date  
09/27/13

**Additional copies of this form can be obtained by contacting the Commission, or online at [www.scoc.state.ny.us](http://www.scoc.state.ny.us). Click on table of contents, Commission Forms, Request for a Variance (Formal application statement).**

Name of Facility: **Monroe County CF** Variance # **13-V-07**

New:  Renewal:

Relief from Standard: 7040.3

Application by: Sheriff Patrick O'Flynn

Date Request Rec: 10/8/13

Last Approved: N/A Length of Approval:

Expiration:

Write-up Prepared by: Keith Zobel

Recommendation by Field Staff: Approve for 30 days

Recommendation at Briefing:

Final Recommendation:

### SUMMARY OF VARIANCE REQUEST

The facility is requesting authorization to house an additional 10 inmates in the 800 unit, and an additional 10 inmates in the 900 housing unit at the Monroe County Correctional Facility.

### RECOMMENDED CONDITIONS

1. That the maximum number of inmates housed in these areas does not exceed the authorized variance numbers 800 Unit (20 at capacity plus 10 variance beds), and 900 Unit (20 at capacity plus 10 variance beds).
2. The placement of double bunks or beds in the 800 and 900 Unit should be arranged as close to the officer's station as possible without jeopardizing the sight lines to the remainder of the housing unit.
3. That inmates who are housed in the above-noted areas must be provided with a bunk, cot, or at a minimum a boat to be used as a bed, along with clean bedding, pursuant to Section 7005.9 of Minimum Standards.
4. That "active supervision" must be provided on a 24-hour basis, pursuant to 9NYCRR Section 7003.2(c) of Minimum Standards.
5. That inmates housed in the above-noted areas receive the same services and programs as the general population.
6. That the county shall not exceed the rated MFC for the purpose of boarding inmates. The Commission does not approve variances for the purpose of generating revenue.

### VARIANCE HISTORY

N/A

### CONSTRUCTION/RENOVATION PLANS

Currently there are no plans to add any additional beds.

OTHER VARIANCES IN EFFECT – applied 13-V-08

**STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):**

Scheduled to be visited on 10/10/13 by Keith Zobel. A review of facility JDPRS reveals a significant number of state ready inmates and parole violators. The county contends that these spikes in population are a short term problem that should stabilize within the next month.

**DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:**

3/13

**ANY OPEN MINIMUM STANDARD VIOLATIONS:**

N/A

**ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:**

None

**JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:**

The facility is experiencing unforeseen spikes in the population. This relief will provide the needed space to accommodate the increase in the inmate population. The facility anticipates this being a short-term population spike. Further, research is being conducted to identify local resources for release of low bail violators.

REVIEWED BY REGIONAL SUPERVISOR:

*Tom  
Ch*

DATE:

*10/8/10  
10/8/10*

---

**OFFICIAL USE ONLY:**

NOTES OF MEETING: \_\_\_\_\_



New York State  
Commission of Correction  
80 Wolf Road  
Albany, New York 12205  
518-485-2465  
518-485-2467 (Fax)

New	_____
Renewal	_____
Variance #	_____
(SCOC USE ONLY)	

**Thomas A. Beilein**  
**Chairman**

**Variance Application Form**

**INSTRUCTIONS TO SHERIFF OR CHIEF ADMINISTRATIVE OFFICER:**

Pursuant to New York State Minimum Standards Part 7050, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/Commissioner to the address or fax number listed above.

Facility: Monroe Correctional Facility

Person requesting: Patrick M. O'Flynn

(Sheriff/Chief Administrative Officer)

- A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7040.3 states that, the total number of inmates confined within each correctional facility shall not exceed the maximum facility capacity of such facility. To request a variance to house additional inmates within the facility the citation should be listed as:

Ex. Part: 7040 Section: 3 Subdivision: n/a

Standard for which the variance is requested:

Part: 7040 Section: 3 Subdivision: n/a

- B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation)

This variance modification is specific to the 800 & 900 Units at the Monroe Correctional Facility. Modification is requested for short-term (30) day use to house Jail Adults as jail adult beds are strained do to a rise in our population. In years past, these units had variance relief and we were able to house this number safely.

- C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation)

This variance will provide necessary space to flex an increased inmate population temporarily into until standard housing areas become available. Many of our jail adult housing units are full, making classification problematic.

- D. Provide the amount of time for which the variance is requested, if applicable:

30 Days      \_\_\_\_\_ Weeks      \_\_\_\_\_ Months

- E. If this variance request is approved, what plans, provisions and timetables are in place for achieving full compliance with the Minimum Standard at issue such as adding to the MFC, etc. (Use additional sheets to provide additional supporting documentation, if necessary).

Variance Request is temporary to address increasing population count levels. Monroe County has contacted NYS authorities to arrange for swifter movement of State Ready and Technical Parole Violators as well as local authorities (RPD, Pre-Trial, Public Defender and Probation) to seek relief and or opportunities to lower our population. Additional research is being conducted to identify local resources for release of low bail violators.



G. Has this variance been previously approved?

Yes  If yes, include the variance number (prev. variances were for a different #) \_\_\_\_\_ No \_\_\_\_\_

Patrick M. O'Flynn

10-8-2013

Signature (Sheriff) (Chief Administrative Officer)

Date

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(SCOC Form #V-1)  
(07/06)

Name of Facility: Monroe County Jail Variance # 13-V-08

New:  Renewal:

Relief from Standard: 7040.3

Application by: Sheriff Patrick O'Flynn

Date Request Rec: 10/8/13

Last Approved: N/A Length of Approval:

Expiration:

Write-up Prepared by: Keith Zobel

Recommendation by Field Staff: Approve 30 days

Recommendation at Briefing:

Final Recommendation:

### SUMMARY OF VARIANCE REQUEST

Due to an increase in inmate population, the facility is requesting to house an additional 13 inmate workers in the PSB dorm. This unit houses exclusively inmate workers who are assigned work tasks in an out of the County Jail and Correctional Facility. Due to work assignments, these inmates are out of the housing unit for several hours each day.

### RECOMMENDED CONDITIONS

1. That the maximum number of inmates housed in these areas does not exceed the authorized variance numbers PSB Dorm (60 at capacity plus 13 variance beds).
2. That only inmates approved and assigned to the Jail's or Correctional Facility's work program are housed in the PSB A/B dormitory.
3. That documentation attesting to inmate worker approval and assignment be made available to Commission staff upon request.
4. The placement of double bunks or beds in the PSB Dorm should be arranged as close to the officer's station as possible without jeopardizing the sight lines to the remainder of the housing unit.
5. That inmates who are housed in the above-noted areas must be provided with a bunk, cot, or at a minimum a boat to be used as a bed, along with clean bedding, pursuant to Section 7005.9 of Minimum Standards.
6. That "active supervision" must be provided on a 24-hour basis, pursuant to 9NYCRR Section 7003.2(c) of Minimum Standards.
7. That inmates housed in the above-noted area receive the same services and programs as the general population.
8. That the county shall not exceed the rated MFC for the purpose of boarding inmates. The Commission does not approve variances for the purpose of generating revenue.

### VARIANCE HISTORY

N/A

### CONSTRUCTION/RENOVATION PLANS

Currently there are no plans to add any additional beds, as the population increase is current

viewed as short-term.

**OTHER VARIANCES IN EFFECT** – 13-V-05 and new application (13-V-07)

**STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):**

Terry Moran Scheduled to visit 10/10/13.

**DATE OF LAST IFP VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:**

3/13

**ANY OPEN MINIMUM STANDARD VIOLATIONS:**

N/A

**ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:**

N/A

**JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:**

The facility is experiencing unforeseen spikes in the population. In addition, because this unit houses inmate workers there are large portions of the day where inmates will be off their unit because of their work assignments. The facility anticipates this being a short-term population spike. Further, research is being conducted to identify local resources for release of low bail violators.

REVIEWED BY REGIONAL SUPERVISOR:

*TM*

DATE:

*10/8/13*

*Rh 10/8/13*

**OFFICIAL USE ONLY:**

NOTES OF MEETING: \_\_\_\_\_



New York State  
Commission of Correction  
80 Wolf Road  
Albany, New York 12205  
518-485-2465  
518-485-2467 (Fax)

New	_____
Renewal	_____
Variance #	_____
(SCOC USE ONLY)	

**Thomas A. Beilein**  
**Chairman**

**Variance Application Form**

**INSTRUCTIONS TO SHERIFF OR CHIEF ADMINISTRATIVE OFFICER:**

Pursuant to New York State Minimum Standards Part 7050, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/Commissioner to the address or fax number listed above.

Facility: Monroe County Jail

Person requesting: Patrick M: O'Flynn

(Sheriff/Chief Administrative Officer)

- A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested. Example: 7040.3 states that, the total number of inmates confined within each correctional facility shall not exceed the maximum facility capacity of such facility. To request a variance to house additional inmates within the facility the citation should be listed as:

Ex. Part: 7040 Section: 3 Subdivision: n/a

Standard for which the variance is requested:

Part: 7040 Section: 3 Subdivision: n/a

- B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation)

This variance modification is specific to the PSB A/B Dormitory of the Monroe County Jail. Modification is requested for short-term (30) day use to house inmate workers (trustees). This population is outside the housing unit for a portion of the day conducting their trustee duties. These inmates are processed via the Monroe County Jail trustee application process and as such are classified appropriately for this housing.

- C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation)

This variance will provide necessary space to flex an increased inmate population temporarily into until standard housing areas become available. The use of this area is cost effective as there will be two (2) deputy jailors assigned. Our Jail population has risen to the point that classification problems exist for male adults and bed space is

- D. Provide the amount of time for which the variance is requested, if applicable:

30 Days      \_\_\_\_\_ Weeks      \_\_\_\_\_ Months

- E. If this variance request is approved, what plans, provisions and timetables are in place for achieving full compliance with the Minimum Standard at issue such as adding to the MFC, etc. (Use additional sheets to provide additional supporting documentation, if necessary).

Variance Request is temporary to address increasing population count levels. Monroe County has contacted NYS Parole and DOCS authorities to arrange for swifter movement and processing of State Ready and Technical Parole Violators. We currentt have 72 technical violators and 108 Parole violators with new charges. We are currently in discussion with the Rochester Police Department, Monroe County Probation, Monroe County Public defender's Office and the Pre Trail Release program seeking alternatives and opportunities to lower our population. A review of our 5 year population trend indicates that our population should start to lower within the next 30 days. Additional research is being conducted to identify local resources for release of low bail violators.



G. Has this variance been previously approved?

Yes

If yes, include the variance number

(prev. variances  
was for a different #)  
No \_\_\_\_\_

Patricia M. O'Higgins

10/8/2013

Signature (Sheriff) (Chief Administrative Officer)

Date

**Additional copies of this form can be obtained by contacting the Commission, or online at [www.scoc.state.ny.us](http://www.scoc.state.ny.us). Click on table of contents, Commission Forms, Request for a Variance (Formal application statement).**

(SCOC Form #V-1)  
(07/06)

Name of Facility: Montgomery County Correctional Facility Variance # 13-V-09

New:  Renewal:

Relief from Standard: 7040.3

Application by: Jail Administrator Mike Franko

Date Request Rec: 9/17/13

Last Approved: N/A Length of Approval:

Expiration:

Write-up Prepared by: Keith Zobel

Recommendation by Field Staff: Approve for 6 months

Recommendation at Briefing:

Final Recommendation:

### SUMMARY OF VARIANCE REQUEST

The facility is requesting authorization to house an additional 4 inmates in the multi purpose area of D-Pod. D-Pod is a Direct Supervision housing unit currently housing female inmates. The multi-purpose area is 361 square feet. Inmates in this housing unit would have access to a bathroom located within the housing pod day space (outside of the multi-purpose room).

### RECOMMENDED CONDITIONS

1. That the maximum number of inmates housed in D-Pod not exceed 24 (MFC of 20 and 4 variance beds in the multi-purpose room).
2. The placement of double bunks or beds in the multi- purpose area should be arranged to give the best sight lines to the Officer responsible for the supervision of the unit.
3. That inmates who are housed in the above-noted areas must be provided with a bunk, cot, or at a minimum a boat to be used as a bed, along with clean bedding, pursuant to Section 7005.9 of Minimum Standards.
4. That "active supervision" must be provided on a 24-hour basis, pursuant to 9NYCRR Section 7003.2(c) of Minimum Standards.
5. That inmates housed in the above-noted areas receive the same services and programs as the general population.
6. That the county shall not exceed the rated MFC for the purpose of boarding inmates. The Commission does not approve variances for the purpose of generating revenue.

### VARIANCE HISTORY

n/a

### CONSTRUCTION/RENOVATION PLANS

Currently there are no plans to add any additional beds. The potential exists to convert the multi-purpose room into permanent housing in the future.

### OTHER VARIANCES IN EFFECT – n/a

**STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):**

Site Visit to Facility conducted on 10/4/13. The facility is experiencing dramatic spikes in the female population.

**DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:**

8/13

**ANY OPEN MINIMUM STANDARD VIOLATIONS:**

N/A

**ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:**

None

**JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:**

The facility is experiencing unforeseen spikes in the female population. This relief will provide the needed space to accommodate the increase in the inmate population.

REVIEWED BY REGIONAL SUPERVISOR: *TM* DATE: 10/8/13

*Rh* 10/8/13

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**OFFICIAL USE ONLY:**

NOTES OF MEETING: \_\_\_\_\_



New York State  
Commission of Correction  
80 Wolf Road  
Albany, New York 12205  
518-485-2465  
518-485-2467 (Fax)

New	_____
Renewal	_____
Variance #	_____
(SCOC USE ONLY)	

Thomas A. Beilein  
Chairman

Variance Application Form

INSTRUCTIONS TO SHERIFF OR CHIEF ADMINISTRATIVE OFFICER:

Pursuant to New York State Minimum Standards Part 7050, Variances, please complete all portions of this form and mail or fax this form Attn: Chairman/Commissioner to the address or fax number listed above.

Facility: MONTGOMERY COUNTY CORRECTIONAL FACILITY

Person requesting: MICHAEL T. FRANKO

(Sheriff/Chief Administrative Officer)

A. State the specific part, section and subdivision of New York State Minimum Standards for which the variance is requested: Example: 7040.3 states that, the total number of inmates confined within each correctional facility shall not exceed the maximum facility capacity of such facility. To request a variance to house additional inmates within the facility the citation should be listed as:

Ex. Part: 7040 Section: 3 Subdivision: n/a

Standard for which the variance is requested:

Part: 7040 Section: 3 Subdivision:

B. In the space provided below include specific plans fully explaining and supporting the alternative manner of compliance. If you are requesting a modification to an existing variance please include that information in the area below as well. (Include or attach any relevant supporting documentation)

C. In the space provided below include a detailed description regarding why this variance is necessary. (Include or attach any relevant supporting documentation)

THE NUMBER OF FEMALE INMATES HAS RISEN AND THE HIGHER NUMBERS APPEAR TO BE A TREND. UTILIZING THIS SPACE WILL ALLOW FOR FLUCTUATIONS IN NUMBERS AND EXPAND CAPACITY IN THE "FEMALE" HOUSING UNIT.

D. Provide the amount of time for which the variance is requested, if applicable:

\_\_\_\_\_ Days \_\_\_\_\_ Weeks 6 Months

E. If this variance request is approved, what plans, provisions and timetables are in place for achieving full compliance with the Minimum Standard at issue such as adding to the MFC, etc. (Use additional sheets to provide additional supporting documentation, if necessary).

IF THIS VARIANCE IS APPROVED, WE WOULD NEED TO MEET WITH SCOC STAFF TO DETERMINE IF IT COULD BE USED PERMANENTLY AND WHAT MODIFICATIONS WOULD NEED TO BE MADE.

NOTE THAT A TOILET/SINK ALREADY EXISTS BEHIND THE OFFICERS' PODIUM THAT WERE ORIGINALLY INTENDED TO SERVICE THAT AREA FOR OVERFLOW HOUSING.



G. Has this variance been previously approved?

Yes \_\_\_\_\_ If yes, include the variance number \_\_\_\_\_ No



Signature ~~(Sheriff)~~ (Chief Administrative Officer)

Date

**Additional copies of this form can be obtained by contacting the Commission, or online at [www.scoc.state.ny.us](http://www.scoc.state.ny.us). Click on table of contents, Commission Forms, Request for a Variance (Formal application statement).**

Name of Facility: Saratoga County Jail

Variance # 13-V-06

New:  Renewal: 

Relief from Standard: 7040

Application by: Sheriff James Bowen

Date Request Rec: September 4,  
2013

Last Approved: N/A Length of Approval: N/A Expiration: N/A

Write-up Prepared by: Deane McGeary

Recommendation by Field Staff: Approve for 6 months

Recommendation at Briefing:

Final Recommendation:

**SUMMARY OF VARIANCE REQUEST**

Sheriff Bowen is requesting relief from Part 7040 by double celling in the following areas:

Housing Area	Current Capacity	Revised	
A Pod Unit 3 (Cells 109-112, 121-124)	32	40	8
A Pod Unit 4 (Cells 105-108)	16	20	4
B Pod Unit 2 (Cells 133-143, 145)	48	60	12
Total	96	120	24

**VARIANCE HISTORY**

N/A

**CONSTRUCTION/RENOVATION PLANS**

N/A

**OTHER VARIANCES IN EFFECT**

08-V-05 (24 Beds)

**STAFF INFORMATION AFTER SITE VISIT (DATE OF LAST VISIT TO FACILITY):**

9/13/13

**DATE OF LAST CYCLE VISIT THAT STANDARD VIOLATIONS WERE IDENTIFIED:**

10/17, 10/18/12

**ANY OPEN MINIMUM STANDARD VIOLATIONS:**

Section 7003.9(c) Key Control

Section 7003.9(e) Key control

**ANY VIOLATIONS WHICH PERTAIN TO THE VARIANCE'S CONDITIONS:**

N/A

**JUSTIFICATION FOR WHY VARIANCE SHOULD OR SHOULD NOT BE EXTENDED:**

The facility is well managed and operated.

The Commission of Correction has not received any grievance appeals relating to double celling.

The facility has not used variance beds to generate any revenue in the past including FEDERAL revenues.

There have been no incidents related to double-celling.

Daily population data specific to gender and age was unavailable due to SCOC and DCJS being unable to extract such data from the portal in a useable report based format.

Review of total population data for the period 1/1/13-5/1/13 shows an average of 179 inmates per day thereby justifying the continuance of variance 08-V-05. Since 5/1/13, this average has increased to 190. From 5/1/13 - 9/18/13, the facility has had to operate above 90% variances capacity 67 days and over 85% variances capacity 88 days. With variance 08-V-05, the facilities Maximum Operational Capacity remains at 175 thereby stressing the facilities ability to separate inmates in accordance with generally accepted classification principles.

Approval of this variance will increase the Maximum Operational Capacity to increase to 194 and facilitate proper separation of both the female and male populations according to their security classifications.

During a site visit conducted on 9/13/13, the facility administration and the Sheriff indicated that the Saratoga County Board of Supervisors refuse to allocate monies in the Sheriff Department's budget for boarding out inmates.

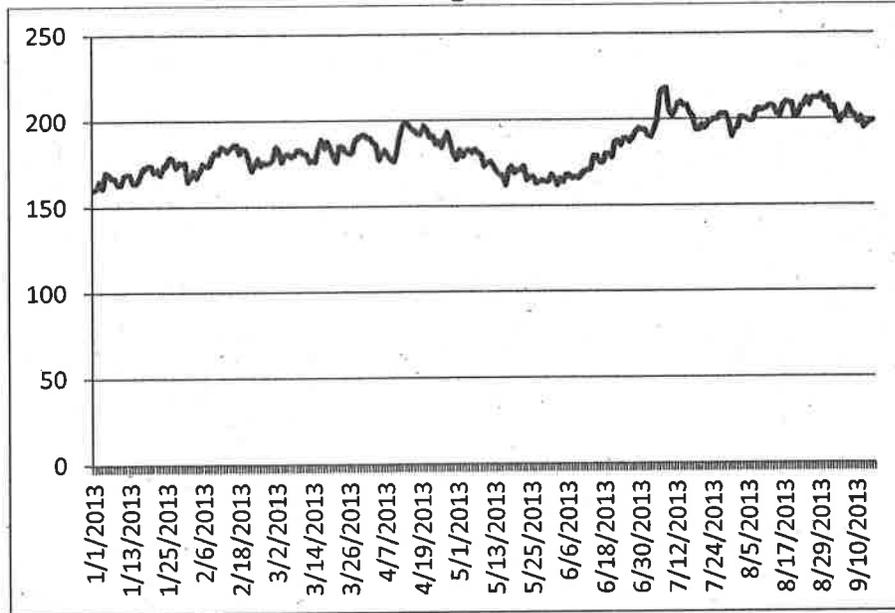
The facility administration and the Sheriff indicated that Saratoga County may be trending toward an increase in jail commitments due to an increase level of drug offenses and changes in the criminal justice community's officials. Additional time is required to further ascertain whether the recently experienced increase can be expected to continue.

As Sheriff Bowen is retiring this year, approval of this variance will assist the incoming Sheriff with his transition.

## Saratoga County Jail Population Trends

1/1/13 - 4/30/13

Average 179



5/1/13 - 9/18/13

Average 190



**RECOMMENDED CONDITIONS IF APPROVED**

1) The County is authorized to double-cell in the following areas only.

Housing Area	Current Capacity	Revised
A Pod Unit 3 (Cells 109-112, 121-124)	32	40
A Pod Unit 4 (Cells 105-108)	16	20
B Pod Unit 2 (Cells 133-143, 145)	48	60
Total	96	120

2) That "active supervision" must be maintained in all housing areas. Minimum Standards section 7003.2(c) defines active supervision as the immediate availability to prisoners or facility staff responsible for the care and custody of such prisoners which shall include:

- (a) uninterrupted ability to communicate orally with and respond to each prisoner unaided by any electronic or other artificial amplifying device; and
- (b) the conducting of supervisory visits at 30-minute intervals;
- (c) the ability of staff to immediately respond to emergency situations; and
- (d) in any facility housing area in which more than 20 inmates are housed, the continuous occupation of a security post within such housing area.

3) That the facility shall not double cell inmates that fall into the following categories:

- (a) pending completion of classification
- (b) punitive segregation
- (c) administrative segregation

4) That inmates housed in these areas receive the same services and programs as the general population.

5) That inmates shall not be double-celled for a period of more than sixty (60) days; however, a mechanism may be put in place to allow inmates to volunteer to remain in a double-cell for a period of more than sixty (60) days. A waiver shall be completed and signed by the inmate if he or she agrees to be double-celled for more than sixty (60) days. This waiver shall be re-evaluated and a new waiver completed every thirty (30) days for the duration of the double-celled period

6) That Commission staff will monitor the effects of the double-celling program on staff and inmates as well as the general operation of the facility.

7) That the facility will maintain information on all double-cell inmates which shall include, but is not limited to:

- (a) name and location of the inmate;
- (b) date of entrance into and release from double-celling; and
- (c) reason for release
- (d) substantiation of eligibility criteria, (e.g. classification instrument)
- (e) 30 day voluntary waivers

These records shall be made available to Commission staff for inspection.

8) That the facility shall monitor its double-celling plan by tracking rates of incidents, grievance, and complaints directly related to double-celling. This documentation shall be made available to Commission staff for inspection.

9) That the county shall implement its double-celling proposal according to the Commission's Double-Celling Guidelines for Local Correctional Facility Variances to Part 7040.

10) The county will not exceed the rated MFC for the purpose of boarding inmates.

REVIEWED BY REGIONAL SUPERVISOR:

TM

DATE:

9/26/13

REVIEWED BY DEPUTY DIRECTOR:

RC

DATE:

10/7/13

---

**OFFICIAL USE ONLY:**

NOTES OF MEETING: \_\_\_\_\_

# New York State Commission of Correction

Population Analysis for Saratoga County Jail

From: 05/01/13 to: 09/18/13

Maximum Facility Capacity	Variance	Classification Capacity %
195	24	80

	In House	Boarded out	Total Count
Average	190.5	0.0	190.5
Highest	218	0	218
Lowest	162	0	162

Average total population as a percent of capacity	78.4 %
Highest total population as a percent of capacity	89.7 %
Lowest total population as a percent of capacity	66.7 %

Peak Population of time period	218.0	Average Total Pop Count	190.5
Number of days total pop above 90% of peak	67	% of days total pop above 90% of peak	47.5 %
Number of days total pop above 85% of peak	88	% of days total pop above 85% of peak	62.4 %
Number of days total pop above MFC @ standard	0	% of days total pop above MFC @ standard	0.0 %
Number of days total pop above MFC w/variances	0	% of days total pop above MFC w/variances	0.0 %
Number of days Boarded Out	0	% of days Boarded Out	0.0 %

Number of days IN HOUSE count above capacity at standard	0	Number of days IN HOUSE count above capacity with variances	0
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Population expected to maintain compliance with Classification	175	% used to calculate compliance with classification	80
--	-----	--	----

Population Projections

Capacity needed to be at 80% rate for:

Surveyed time period's peak population

Surveyed time period's average population

Average annual growth, last 10 years studied

Annual average population at PROJECTED rate of:

	Projected Peak	Number cells needed @ 80%	Projected Average	Number cells needed @ 80%
2014	222	278	194	243
2015	227	284	198	248
2016	231	289	202	253
2017	236	295	206	258
2018	241	301	210	263
2019	246	307	215	268
2020	250	313	219	274
2021	255	319	223	279
2022	261	326	228	285
2023	266	332	232	290
2024	271	339	237	296
2025	276	346	242	302
2026	282	353	246	308
2027	288	360	251	314
2028	293	367	256	320
2029	299	374	262	327
2030	305	382	267	333
2031	311	389	272	340
2032	318	397	278	347
2033	324	405	283	354
2034	330	413	289	361
2035	337	421	295	368
2036	344	430	300	375
2037	351	438	306	383
2038	358	447	313	391
2039	365	456	319	398
2040	372	465	325	406
2041	380	474	332	415
2042	387	484	338	423
2043	395	494	345	431

**New York State Commission of Correction**

Population Analysis for Saratoga County Jail

From: 01/01/13 to: 04/30/13

Maximum Facility Capacity	Variance	Classification Capacity %
195	24	80

	In House	Boarded out	Total Count
Average	179.4	0.0	179.4
Highest	199	0	199
Lowest	160	0	160

Average total population as a percent of capacity	73.8 %
Highest total population as a percent of capacity	81.9 %
Lowest total population as a percent of capacity	65.8 %

Peak Population of time period  Average Total Pop Count

Number of days total pop above <u>90%</u> of peak	<input type="text" value="61"/>	% of days total pop above <u>90%</u> of peak	<input type="text" value="50.8 %"/>
Number of days total pop above <u>85%</u> of peak	<input type="text" value="101"/>	% of days total pop above <u>85%</u> of peak	<input type="text" value="84.2 %"/>
Number of days total pop above MFC @ standard	<input type="text" value="0"/>	% of days total pop above MFC @ standard	<input type="text" value="0.0 %"/>
Number of days total pop above MFC w/variances	<input type="text" value="0"/>	% of days total pop above MFC w/variances	<input type="text" value="0.0 %"/>
Number of days Boarded Out	<input type="text" value="0"/>	% of days Boarded Out	<input type="text" value="0.0 %"/>

Number of days IN HOUSE count above capacity at standard	<input type="text" value="0"/>	Number of days IN HOUSE count above capacity with variances	<input type="text" value="0"/>
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Population expected to maintain compliance with Classification	<input type="text" value="175"/>	% used to calculate compliance with classification	<input type="text" value="80"/>
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## Population Projections

Capacity needed to be at 80% rate for:

248

Surveyed time period's peak population

224

Surveyed time period's average population

-1.0 %

Average annual growth, last 10 years studied

2 %

Annual average population at PROJECTED rate of:

	Projected Peak	Number cells needed @ 80%	Projected Average	Number cells needed @ 80%
2014	203	254	183	229
2015	207	259	187	233
2016	211	264	190	238
2017	215	269	194	243
2018	220	275	198	248
2019	224	280	202	253
2020	229	286	206	258
2021	233	291	210	263
2022	238	297	214	268
2023	243	303	219	273
2024	247	309	223	279
2025	252	315	227	284
2026	257	322	232	290
2027	263	328	237	296
2028	268	335	241	302
2029	273	341	246	308
2030	279	348	251	314
2031	284	355	256	320
2032	290	362	261	327
2033	296	370	267	333
2034	302	377	272	340
2035	308	385	277	347
2036	314	392	283	354
2037	320	400	289	361
2038	326	408	294	368
2039	333	416	300	375
2040	340	425	306	383
2041	346	433	312	390
2042	353	442	319	398
2043	360	451	325	406

Facility	JTBR	Var. Bed	MFC	MOC	VMFC	VMOC	Avg. Cty. Pop.	Avg. Tot. Pop.	Peak Pop.	Avg. Co. Board	Avg. Co. Board in	High Board in	Avg. Ex. Fed.	High Fed.	War. ranted	Justification	Violations / Concerns listed on IFF or last report	
Cortland	✓	15	60	48	75	60	67.6	66.4	77	11.4	0	29	0	1	Yes	Avg. Cty pop> MOC	Exercise area searches,	
Genesee		10	87	70	97	78	67.7	68.7	89	18.9	0.8	2	1	1	Yes	Avg. Cty pop> MOC	Discipline policy, food service personell medical clearance Commissary audit, Active supervision, Count procedures, Staffing compliance	
Monroe CI (90%)			1171	1054	1191	1072	920.5	969.2	1080	0.94	1.43	3	48.7	59	No	Avg. Cty pop < MOC Excessive Feds	firearm inspections, lock and securing devices	
Monroe CF (95%)		10	496	471	506	480	307.7	307.8	393	0	0	0	0	0	No	Avg. Cty pop < MOC		
Nassau (90%)		26	1916	1724	1942	1747	1246.5	1316.1	1376	6.9	10.4	16	69.4	57	No	Avg. Cty pop < MOC Excessive Feds	P Drive files indicate last issues identified were in 2011.	
Niagara	✓	56	443	354	499	399	356.1	463	497	0	0.95	2	106.9	120	No	Avg. Cty pop < MOC Excessive Feds	Discipline procedures in rulebook, kitchen areas need painting Operates above 90% with variances	
Onandaga Pen		52	512	409	564	451	460	495.4	548	24.2	49.2	97	35.2	46	Yes	Avg. Cty pop> MOC	None	
Orleans	✓	17	82	65	99	79	64	64	85	1.4	4.4	12	0	0	No	Avg. Cty pop < MOC	Misbehavior report incomplete, facility sanitation, 3 hours instruction for youth	
Oswego	✓	10	159	127	169	135	153.6	153.6	168	11.1	0	0	0	0	Yes	Avg. Cty pop> MOC	Unsupervised inmates in hallways, facility sanitation exercise area inspections,	
Otsego		6	100	80	106	85	74.7	74.7	95	1	2.1	11	0	0	No	Avg. Cty pop < MOC	Chemical agent policy and procedure	
Putnam	✓	4	128	102	140	112	108.4	111.8	130	2	7.9	23	3.4	4	No	Classification violations	Property inventories, classification	
Rockland		27	280	224	307	246	229.2	229.7	258	0.6	0.2	3	0.4	4	Yes	Avg. Cty pop> MOC	Interior needs cleaning and paint-unsanitary	
Suffolk CF (90%)		5	858	772	863	776	736.2	736.2	761	0	1.1	2	0	0	Yes	Special purpose housing	P drive files indicate last issues identified 2009	
Suffolk CI (90%)	✓	371	764	687	1135	1021	897.1	898.8	1009	25.28	6.9	11	1.7	5	Yes	Avg. Cty pop> MOC		
Tompkins	✓	18	75	60	93	74	82.4	82.4	89	8.3	0	0	0	0	Yes	Avg. Cty pop> MOC	Supervision documentation	
Saratoga (80%)		48	195	156	243	194	185.35	185.35	218	0	0	0	0	0	Yes	Avg. Cty pop> MOC	Key control, secure sanitation closets	
JTBR																		Jail Transfer Ban Roster
MFC																		Maximum Facility Capacity
MOC																		Maximum Operational Capacity
VMFC																		Variance Maximum Facility Capacity
VMOC																		Variance Maximum Operational Capacity





NEW YORK CITY DEPARTMENT OF CORRECTION  
Dora Schriro, Commissioner  
Office of the Commissioner

75-20 Astoria Blvd  
East Elmhurst, NY 11370  
718 • 546 • 0890  
Fax 718 • 278 • 6022

July 31, 2013

Hon. Thomas A. Beilein  
Chair  
NYS Commission of Correction  
Alfred E. Smith State Office Building  
80 S. Swan Street, 12<sup>th</sup> Floor  
Albany, NY 12210



**RE: Request for Establishment of Maximum Facility Capacity for the Central Intake Facility**

Dear Chair Beilein:

Per the State Commission of Correction's (SCOC) letter of March 20, 2012, I am writing to request the establishment of a Maximum Facility Capacity (MFC) for the Central Intake Facility. The SCOC's letter stated that this request should be submitted "[w]ithin 90 days of the completion of construction of this project." The anticipated construction completion date is September 30, 2013 which is within 90 days of the date of this letter. A copy of both the SCOC's letter of March 20 and the draft Maximum Facility Capacity Plan are attached.

As Department of Correction (DOC) and SCOC staffs discussed at the SCOC's monthly meeting of March 20, 2012, I am also writing to request that the SCOC revise its requirement in the draft MFC plan regarding the maximum time periods for holding new admission inmates in the Central Intake Facility. The SCOC time periods are:

- 12 hours for individual occupancy housing areas
- 04 hours for multiple occupancy housing areas

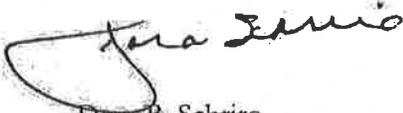
As we discussed at the March 20, 2012 meeting, I am requesting that the MFC be modified to permit DOC to house new admission inmates in facilities with new admission housing within 24 hours of coming into DOC's custody. Since the Central Intake Facility will be a processing center for new admission inmates, and not a housing facility, inmates will be transferred from the Central Intake Facility to a jail and assigned to a housing area consistent with the intake assessment within this 24-hour period. The 24 hours for processing new admission inmates is consistent with DOC's existing time frame, which was originally established by the Federal Court in the 1980s. DOC will monitor the Central Intake's compliance with this time frame. The DOC's current system-wide average time for processing new admission inmates is 17 hours and 13 minutes.

In addition, DOC will comply with the SCOC's draft staffing plan for the Central Intake Facility. The SCOC's March 20, 2012, letter stated that compliance with the staffing plan is a condition of the SCOC's approval of the Central Intake project. The draft staffing plan is attached.

At the request of SCOC Supervisor Steve Savoy, I have also included a plan for the evacuation of the Central Intake Facility in the event of an emergency or natural disaster such as a hurricane. The plan includes arrangements for the relocation of new admission processing functions to other facilities.

Thank you again for your consideration and approval of this request.

Sincerely,

A handwritten signature in black ink, appearing to read "Don B. Schiro". The signature is fluid and cursive, with a large loop at the beginning.

Don B. Schiro  
Commissioner



STATE OF NEW YORK • EXECUTIVE DEPARTMENT  
STATE COMMISSION OF CORRECTION  
Alfred E. Smith State Office Building  
80 S. Swan Street, 12th Floor  
Albany, New York 12210  
(518) 485-2346  
FAX (518) 485-2487

CHAIRMAN  
Thomas A. Bellein  
  
COMMISSIONER  
Phyllis Harrison-Ross, M.D.

March 20, 2012

Commissioner Dora B. Schriro  
New York City Department of Correction  
75-20 Astoria Boulevard, Suite 110  
East Elmhurst, New York 11370

Re: West Facility Central Intake Plans

Dear Commissioner Schriro:

This is to advise that at the regularly scheduled meeting held on March 20, 2012, the New York State Commission of Correction signified approval of the above project with the following provisions:

1. Within 90 days of the completion of construction of this project, the Department shall request from the Commission of Correction, the establishment of a Maximum Facility Capacity for the Central Intake Facility (Sprungs).
2. The Department shall adhere to the Position and Staff Analysis established for this facility, Pursuant to Part 7041 - Staffing Requirements. (To be sent under a separate cover letter)

The Commission's approval extends, in this instance, only to those matters within its jurisdiction as set forth in Article 3 of the Correction Law and does not mean in any manner, actual or as may be implied, that the subject matter of this approval complies with any other applicable code, rule, regulation, ordinance or law to which the structure herein is subject.

Sincerely,

Thomas A. Bellein  
Chairman

Cc: Sarah Taylor, Chief

**NEW YORK STATE  
COMMISSION OF CORRECTION**



**October 16, 2013**

**MAXIMUM FACILITY CAPACITY**

**for  
NYC Department of Corrections  
Central Intake Facility**

**Thomas A. Beilein**  
*Chairman*

**Phyllis Harrison-Ross, M.D.**  
*Commissioner*

**Thomas Loughren**  
*Commissioner*

I. A. NON-STANDARD HOUSING

Name of Housing Area	Total size of unit (Sq. Ft. of Floor Space)	Description of Use (Limit as to use, time frames, etc.)
<b>Sprung 1</b>		
Pen 1	146 Sq. Ft.	Multiple occupancy shall be limited to nine (9) inmates.
Pen 2	176 Sq. Ft.	Multiple occupancy shall be limited to eleven (11) inmates.
Pen 3	141 Sq. Ft.	Multiple occupancy shall be limited to nine (9) inmates.
Pen 4	135 Sq. Ft.	Multiple occupancy shall be limited to nine (9) inmates.
Pen 5	224 Sq. Ft.	Multiple occupancy shall be limited to fourteen (14) inmates.
Pen 6	137 Sq. Ft.	Multiple occupancy shall be limited to nine (9) inmates.
Pen 7	148 Sq. Ft.	Multiple occupancy shall be limited to nine (9) inmates.
Pen 8	63 Sq. Ft.	Multiple occupancy shall be limited to three (4) inmates.
Pen 9	58 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates.
Pen 10	49 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates.
Pen 11	60 Sq. Ft.	Multiple occupancy shall be limited to four (4) inmates.
Pen 12	161 Sq. Ft.	Multiple occupancy shall be limited to ten (10) inmates.
<b>Sprung 2</b>		
Pen 1	107 Sq. Ft.	Multiple occupancy shall be limited to seven (7) inmates.

Pen 2	111 Sq. Ft.	Multiple occupancy shall be limited to seven (7) inmates.
Pen 3	123 Sq. Ft.	Multiple occupancy shall be limited to eight (8) inmates.
Pen 4	128 Sq. Ft.	Multiple occupancy shall be limited to eight (8) inmates.
Pen 5	58 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates.
Pen 6	58 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmate.
Pen 7	58 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates.
Pen 8	58 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates. <b>No Toilet</b>
<b>Sprung 3</b>		
Pen 1	61 Sq. Ft.	Multiple occupancy shall be limited to four (4) inmates.
Pen 2	42 Sq. Ft.	Multiple occupancy shall be limited to two (2) inmates.
Pen 3	42 Sq. Ft.	Multiple occupancy shall be limited to two (2) inmates.
Pen 4	186 Sq. Ft.	Multiple occupancy shall be limited to twelve (12) inmates.
Pen 5	75 Sq. Ft.	Multiple occupancy shall be limited to five (5) inmates..
Pen 6	117 Sq. Ft.	Multiple occupancy shall be limited to seven (7) inmates.
Pen 7	79 Sq. Ft.	Multiple occupancy shall be limited to five (5) inmates..
<b>Sprung 4</b>		
Pen 1	164 Sq. Ft.	Multiple occupancy shall be limited to ten (10) inmates.
Pen 2	175 Sq. Ft.	Multiple occupancy shall be limited to eleven (11) inmates.

Pen 3	174 Sq. Ft.	Multiple occupancy shall be limited to eleven (11) inmates.
Pen 4	261 Sq. Ft.	Multiple occupancy shall be limited to seventeen (17) inmates.
Pen D1	181 Sq. Ft.	Multiple occupancy shall be limited to twelve (12) inmates.
Pen D2	54 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates.
Pen D3	54 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates.
Pen D4	59 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates.
Pen D5	58 Sq. Ft.	Multiple occupancy shall be limited to three (3) inmates.

**This housing may be used only for the durations shown, as listed in the right hand column. Any other use is prohibited. This housing is non-standard and will not be added to the MFC.**

HOUSING TYPE	TOTALS
Subtotal Individual Housing Units Used for General Housing:	0
Subtotal Individual Housing Units Used for Special Housing:	0
Subtotal Multiple Housing Units Used for General Housing:	0
Subtotal Multiple Housing Units Used for Special Housing:	0
<b>MAXIMUM FACILITY CAPACITY:</b>	<b>0</b>

Other identified housing areas not on Max. Facility Capacity                      **Yes ( X ) No ( )**

The above-noted capacity is based upon the following:

1. The number of properly equipped individual occupancy housing units, including the number of properly equipped admissions, medical and mental health and any other special housing units;
2. The number of properly equipped multiple occupancy housing units, including the number of properly equipped admissions, medical and mental health and any other special housing units; and
3. The facility's ability to provide required programs and services and to comply with other rules and regulations of 9 NYCRR Chapter IV which are related to facility capacity.

\_\_\_\_\_ Adjustments have not been made based on the facility's ability to provide required programs and services and to comply with other rules and regulations of 9 NYCRR Chapter IV which are related to facility capacity.

\_\_\_\_\_ Adjustments have been made based on the facility's ability to provide required programs and services and to comply with other rules and regulations of 9 NYCRR Chapter IV which are related to facility capacity. (Explain below.)

**COMMENTS:**

Based on agreement with NYC Department of Corrections and the Commission of Correction inmates will need to be assigned to a facility housing unit within 24 hours of being remanded to the Department.

To the best of my knowledge all information contained in this formulation is correct.

Submitted by:

Approved by:

\_\_\_\_\_  
*(Preparer's Signature and Title, and Date)*

\_\_\_\_\_  
*(Signature Title and Date)*

**NEW YORK STATE COMMISSION OF CORRECTION**

**Albany, New York**



**Position and Staffing Analysis  
for**

**West Facility Central Intake**

**March 11, 2012**

**Thomas A. Beilein**  
*Chairman*

**Phyllis Harrison-Ross, M.D.**  
*Commissioner*



For Department of State use only.

## Notice of Adoption

Correction, State Commission of  
(SUBMITTING AGENCY)

- This adoption will amend the NYCRR.  
 This adoption will not amend the NYCRR.

**NOTE:** Typing and submission instructions are at the end of this form. Please be sure to COMPLETE ALL ITEMS. Incomplete forms will be cause for rejection of this notice.

### 1. Action taken:

Amendment of sections 7032.5 and 7032.8 of Title 9 NYCRR.

- "X" box if the rule was originally proposed as a consensus rule making.

### 2. Effective date of rule:

- Date this notice is published in the *State Register*.  
 This is a "rate-making" as defined in SAPA §102(2)(a)(ii), and, is effective as follows:  
 Date of filing.  
 Other date (specify): \_\_\_\_\_  
 Other date (specify): \_\_\_\_\_  
 \_\_\_\_\_ days after filing.

### 3. Statutory authority under which the rule was adopted:

Correction Law sections 45(4), 45(6) and 45(15).

### 4. Subject of the rule:

Electronic submission of grievances.

### 5. Purpose of the rule:

To allow local correctional facilities to submit inmate grievances electronically.

6. Terms and identification of rule :

- A. I.D. No. of original notice of **proposed** or **emergency/proposed** rule making: CMC-35-13-00006 - P
- B. Comparison of the proposed rule to the adopted rule (CHECK ALL THAT APPLY):

No changes were made to the proposed rule.

• Do NOT attach the text of the previously published rule. If the last previously published RIS, RFA, RAFA or JIS remain adequate and do not require correction, SKIP ITEMS 9-12 and do NOT attach any such statements. If any of the most recently published statements were deemed inadequate or required correction, complete Item 9, 10, 11, or 12 as applicable, do NOT attach previously published statements. Be sure to complete C, if applicable, as well as remaining Items 7-8 and 13-14.

Nonsubstantive changes were made in [Parts, sections, subdivisions or paragraphs]:

[Redacted]

• Attach the original of the text as adopted (if proposed as full text, submit full text; if proposed as a summary, submit a summary) typed in scannable format. Do not skip Items 9-12; revised statements or explanatory statements are required.

Text attached.

Summary attached.

This is a "rate making" as defined in SAPA §102(2)(a)(ii) and, pursuant to SAPA §202(7)(b), the agency elected to submit an original copy of a description of the substance. Substantial revisions were made in the following Parts, sections, subdivisions or paragraphs:

[Redacted]

C. List the publication date and I.D. No. of any previously published notice(s) of **revised** rule making:

Publication date: \_\_\_\_\_, I.D. No. \_\_\_\_\_

Publication date: \_\_\_\_\_, I.D. No. \_\_\_\_\_

7. The text of the final rule and any required statements and analyses may be obtained from:

Agency contact Brian M. Callahan, Associate Attorney

Agency name New York State Commission of Correction

Office address Alfred E. Smith State Office Building  
80 S. Swan Street, 12th Floor, Albany, New York 12210

Telephone (518) 485-2346 E-mail: Brian.Callahan@scoc.ny.gov

8. Additional matter required by statute:

Yes (include below material required by statute).

[Redacted]

No additional material required by statute.

9. Revised Regulatory Impact Statement (RIS)

(SELECT AND COMPLETE ALL THAT APPLY; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS)

A. The attached Revised RIS contains:

The full text of the Revised RIS.

A summary of the Revised RIS.

B. A **statement is attached** explaining why a revised RIS is not required (check one box):

Changes made to the last published rule do not necessitate revision to the previously published RIS.

This is a technical amendment exempt from SAPA §202-a.

- C.  A revised RIS is **not** attached because this rule is a "rate making" as defined in SAPA §102(2)(a)(ii).
- A revised RIS is **not** attached because this rule was proposed as a consensus rule as defined in SAPA

**10. Revised Regulatory Flexibility Analysis (RFA) for small businesses and local governments**  
 (SELECT AND COMPLETE ALL THAT APPLY; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS)

- A. The attached Revised RFA contains:
  - The full text of the Revised RFA.
  - A summary of the Revised RFA.
- B. A **statement is attached** explaining why a revised RFA is not required (check one box):
  - Changes made to the last published rule do not necessitate revision to the previously published RFA.
  - The changes will not impose any adverse economic impact or reporting, recordkeeping or other compliance requirements on small businesses or local governments. The attached statement sets forth this agency's findings and the reason(s) upon which the findings were made, including what measures were used to determine those findings.
- C.  A revised RFA is **not** attached because this rule is a "rate making" as defined in SAPA §102(2)(a)(ii).
- A revised RFA is **not** attached because this rule was proposed as a consensus rule as defined in SAPA §102(11).

**11. Revised Rural Area Flexibility Analysis (RAFA)**  
 (SELECT AND COMPLETE ALL THAT APPLY; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS)

- A. The attached Revised RAFA contains:
  - The full text of the Revised RAFA.
  - A summary of the Revised RAFA.
- B. A **statement is attached** explaining why a revised RAFA is not required (check one box):
  - Changes made to the last published rule do not necessitate revision to the previously published RAFA.
  - The changes will not impose any adverse impact or reporting, recordkeeping or other compliance requirements on public or private entities in rural areas. The attached statement sets forth this agency's findings and the reason(s) upon which the findings were made, including what measures were used to determine those findings.
- C.  A revised RAFA is not attached because this rule is a "rate making" as defined in SAPA §102(2)(a)(ii).
- A revised RAFA is **not** attached because this rule was proposed as a consensus rule as defined in SAPA §102(11).

**12. Revised Job Impact Statement (JIS)**  
 (SELECT AND COMPLETE ALL THAT APPLY; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS)

- A. The attached Revised JIS contains:
  - The full text of the Revised JIS.
  - A summary of the Revised JIS.
- B. A **statement is attached** explaining why a revised JIS is not required (check one box):
  - Changes made to the last published rule do not necessitate revision to the previously published JIS.
  - The changes will not impose a substantial impact on jobs and employment opportunities. The attached statement sets forth this agency's findings that the rule will have a positive impact or no impact on jobs and employment opportunities; except when it is evident from the subject matter of the rule that it could only have a positive impact or no impact on jobs and employment opportunities, the statement shall include a summary of the information and methodology underlying that determination.
- C. A revised JIS is **not** attached because:
  - This rule is a "rate making" as defined in SAPA §102(2)(a)(ii).
  - This rule was proposed by the State Comptroller or Attorney General.

**13. Assessment of Public Comment** (includes legislative comments) (check applicable box):

- A.  45-day minimum comment period is complete (Full text was submitted with proposal or summary of text was submitted with the proposal and the full text was posted on a State web site or the rule is a consensus rule or a rule defined under SAPA §102[2][a][ii] [Rate Making])
- 60-day minimum comment period is complete (Summary of text was submitted with the proposal and the full text was not posted on a State web site or the rule is not a consensus rule or a rule defined under SAPA §102[2][a][ii] [Rate Making])
- B. (COMPLETE ONE; ALL ATTACHMENTS MUST BE 2,000 WORDS OR LESS)
- Attached is an assessment of public comment.  
No particular form is required, and it need only include comments not addressed in any previously published assessment for this rule. However, the assessment must be based on any written comments received by the agency or any comments presented at any public hearing held by the agency about this rule (include legislative comment). It must contain a summary and an analysis of the issues raised and significant alternatives suggested, a statement of the reason(s) why any significant alternatives were not incorporated, and a description of any changes made as a result of such comments.
- An assessment is not attached because no comments were received.
- An assessment is not required because this action is for a "rate making" as defined in SAPA §102(2)(a)(ii).

**14. Referenced material** (check one box):

- No information is being incorporated by reference in this rule.
- This rule contains referenced material in the following Parts, sections, subdivisions or paragraphs:

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**15. Initial Review of Rule** (SAPA §207)

(SELECT AND COMPLETE ONE)

- A.  As a rule that requires a RFA, RAFA or JIS, this rule will be initially reviewed in the calendar year \_\_\_\_\_, which is no later than the 3<sup>rd</sup> year after the year in which this rule is being adopted.
- B.  As a rule that requires a RFA, RAFA or JIS, this rule will be initially reviewed in the calendar year \_\_\_\_\_, which is the 4<sup>th</sup> or 5<sup>th</sup> year after the year in which this rule is being adopted. This review period, justification for proposing same, and invitation for public comment thereon, were contained in a RFA, RAFA or JIS:
- Attached is an assessment of public comment on the issue of the 4 or 5-year initial review period; or
- An assessment of public comment on the 4 or 5-year initial review period is not attached because no comments were received on the issue.
- C.  As a rule that does not require a RFA, RAFA or JIS, this rule will be initially reviewed in the calendar year 2018, which is no later than the 5<sup>th</sup> year after the year in which this rule is being adopted.
- D.  Not Applicable. This rule is a "rate making" or a "consensus rule," or the agency is not required to review existing rules.

**AGENCY CERTIFICATION (To be completed by the person who PREPARED the notice)**

I have reviewed this form and the information submitted with it. The information contained in this notice is correct to the best of my knowledge.

I have reviewed Article 2 of SAPA and Parts 260 through 263 of 19 NYCRR, and I hereby certify that this notice complies with all applicable provisions.

Name Brian M. Callahan

Signature \_\_\_\_\_

Address NYS Commission of Correction, 80 S. Swan Street, Albany, New York 12210Telephone (518) 485-2346E-mail Brian.Callahan@scoc.ny.govDate 10/16/2013**Please read before submitting this notice:**

1. Except for this form itself, all text must be typed in the prescribed format as described in the Department of State's *Register* procedures manual, *Rule Making in New York*.
2. Rule making notices with any necessary attachments should be e-filed via the Department of State website.



Text:

Subdivision (b) of section 7032.5 of Title 9 is amended to read as follows:

(b) Within three business days after receipt of the grievant's notice of appeal, the grievance coordinator shall mail, or electronically submit in a manner and form prescribed by the Commission of Correction, the appeal, the accompanying investigation report and all other pertinent documents to the Commission's Citizens' Policy and Complaint Review Council.

Paragraph (1) of subdivision (d) of section 7032.5 of Title 9 is amended to read as follows:

(1) Except as provided in paragraph (2) of this subdivision, the Citizens' Policy and Complaint Review Council shall issue a written determination to the appeal within 45 business days of receipt, copies of which shall be [sent] provided to the grievant, the chief administrative officer and the grievance coordinator. If such determination is in favor of the grievant as a matter of law, the chairperson of the Citizens' Policy and Complaint Review Council shall direct the chief administrative officer to comply with the grievance and provide an appropriate remedy.

Section 7032.8 of Title 9 is amended to read as follows:

(a) The grievance coordinator shall act as a liaison between the grievant, the chief administrative officer and the Commission of Correction in all matters that pertain to the inmate grievance program.

(b) For any grievance initially submitted electronically pursuant to subdivision (b) of section 7032.5 of this Part the Citizens' Policy and Complaint Review Council may issue its determination to the chief administrative officer and grievance coordinator, as required by subdivision (d) of section 7032.5 of this Part, in a similar electronic manner. In such an instance, the grievance coordinator shall print and provide a paper copy of the written determination to the grievant, if still incarcerated in the facility, within one (1) business day.