

2014

Investigations and Standards Office Inspection Report

ISO _____
INVESTIGATIONS
& STANDARDS OFFICE

Introduction

Through the *Corrections Act and Regulation*, the Investigations and Standards Office (ISO) has the mandate to carry out inspections of the Whitehorse Correctional Centre (WCC) and report on the findings and recommendations to the Corrections branch and Deputy Minister.

To allow for the most effective use of the ISO and Corrections Branch resources, programs and services are generally selected for inspection using a risk assessment process which forms part of ISO's Risk-based Inspections Framework. The risk assessment process prioritizes programs and services for examination of those with the highest potential for risk such as those where non-compliance with corrections policy could result in serious breaches of the *Corrections Act and Regulation*. For the purpose of this inspection, the ISO inspection team included the Senior Investigator, three principal investigators and the Director.

For this year's inspection, based on the abovementioned framework, the ISO inspected two key areas of the operation of the Whitehorse Correctional Centre (WCC) for compliance with the *Corrections Act*, its *Regulation* and WCC policy.

This Inspection focused on two areas of risk:

- **Focus A:** Complaint Process
- **Focus B:** Use of section 21 long term confinement.

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Part A: Complaint Process

ISO Inspection of WCC Complaint process

The inspection of the complaint process at Whitehorse Correctional Centre (WCC) began on April 7, 2014. During the inspection ISO examined the following areas of the complaint process:

- paper flow of the complaint form;
- the processes involved in resolving the issues identified in the complaints;
- documentation by staff in relation to the complaint;
- and the information and documents available to the inmates within each unit.

ISO reviewed the entire complaint process from the beginning to the end. The process starts with an inmate writing a complaint form. The form is then submitted to the Unit Officer, who, if the issues cannot be resolved, then forwards the complaint to the Manager of Correctional Services (MCS). Following consideration of the complaint and the response, the MCS then forwards the complaint to the Deputy Superintendent or Superintendent either to resolve at that level or confirm resolution. Once responded to, the complaint form is returned to the inmate.

ISO's inspection incorporated a review of the resolution process through the different levels of staff. ISO also examined the timeliness of the response, and whether the inmate requested that ISO review the complaint response. Moreover, ISO considered whether the issues in the complaint were resolved adequately by corrections staff. Additionally, ISO performed a physical inspection of WCC and examined all units within the facility. A review of each unit was conducted for the purpose of ensuring that proper documents, specifically, the complaint forms were available to all inmates, and to verify that ISO posters were visible to all inmates on the unit.

Complaint systems within a correctional centre play a very critical role. The complaint system helps to support the effective management of inmates in custody by addressing issues before they escalate; moreover, an inmate's right to seek redress of legitimate complaints allows for issues to be brought forward which may affect inmate rights as enshrined in the CAR. Over the past thirty years, in Canada there have been numerous judicial reviews following disturbances in correctional centres where a contributing factor was a complaint system which was perceived as inaccessible, unfair and ultimately ineffective at addressing any inmate grievances. The CAR and current WCC policy

and standing orders stress the early resolution of issues with the ideal situation being that complaints and concerns are resolved at the unit level.

Policies and Legislation

Whitehorse Correctional Centre Policy F 1.1 Inmate Complaints

Corrections Act Regulations (CAR)

40(1) An inmate may make a written complaint to a staff member who must forward it, as soon as practicable, to the person in charge.

(2) The person in charge must, within 7 days of the receipt of the complaint, investigate the complaint and advise the complainant, in writing, of the results of the investigation as soon as practicable after having completed the investigation

(3) The person in charge must keep a record of

(a) written complaints under this section;

(b) the manner in which the complaints are resolved; and

(c) the written advice given to a complainant under subsection (2) as a result of the investigation of the complaint.

42(1) A complainant may request in writing that the director of the investigations and standards review the response to a complaint under sections 40 [*complaint by inmate*] or 41 [*complaint by others*].

(2) On receipt of a request for a review, the person in charge or the director of corrections as the case may be, must immediately provide the director of investigations and standards with a record of

(a) the written complaint;

(b) the manner in which the complaint was resolved; and

(c) the written advice given to the complainant as a result of the investigation of the complaint.

(3) The director of investigations and standards must, within 7 days of receipt of a request for a review, respond to the complainant and the person in charge or the director of corrections, as the case may be, to verify receipt of the request.

- (4) The director of investigations and standards must complete the review as soon as practicable after receiving the request and upon completion of it may
- (a) confirm the decision;
 - (b) direct the person in charge or the director of corrections, as the case may be, to reconsider their decision taking into account the reasons set out in the review report; or
 - (c) substitute their own decision for that of the person in charge or the director of corrections, as the case may be.

Methodology for inspection of complaint system

ISO reviewed 60 complaints from the time period of October 2013 to April 2014. The complaints were randomly selected by pulling 10 complaints from each month. The complaints reviewed included five complaints from female inmates. See **Appendix A** for table. The complaint files were then reviewed to see if the issue was resolved or responded to appropriately; if the inmate was responded to within the required timeline; and if the inmate then requested a further review through ISO.

ISO interviewed WCC staff including an administrative employee, a MCS, and a unit level correctional officer and also sought clarification on certain aspects of the complaint process from the Deputy Superintendent of Operations. As well, ISO reviewed the complaint tracking system currently used by WCC.

ISO also reviewed all female complaints from August, 2013 to July 21, 2014 in order to determine whether or not any gender-based issues were evident in the complaints made. There were a total of 32 formal complaints submitted by six different female inmates.

A physical inspection was also completed by ISO investigators.

Complaints Received in 2013

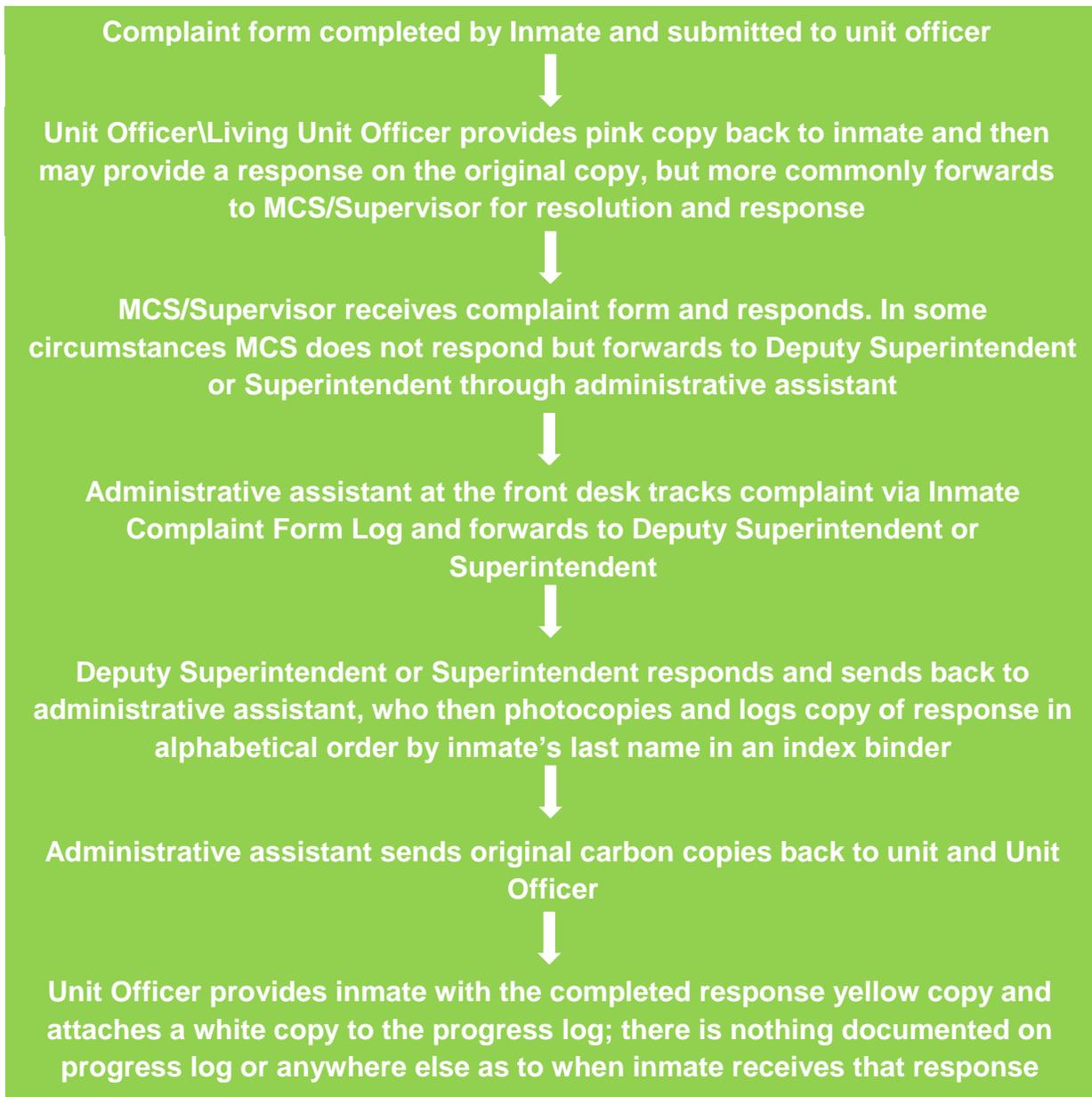
In 2013, WCC received a total of 570 complaints, an average of 46 complaints per month. 510 of these were from male inmates, and 60 were female inmates. The month of July had the most complaints with a total of 79, while September had the least



number of complaints with 21, and 18 complaints were undated. See **Appendix B** for the number of complaints for all months.

In 2013, ISO received and responded to 90 complaints that were investigated (15.8% of all complaints WCC received)

Complaint Process



Physical Inspection

One of the Managers of Correctional Services, guided ISO investigators through the entire facility. The purpose of the physical inspection was to verify that ISO posters were appropriately placed and visible to all inmates. The presence of adequate complaint forms and ISO envelopes at the unit officer's desk was also checked. ISO regularly follows up with WCC management to ensure WCC has ISO posters for each unit and confidential ISO envelopes to provide to the inmates. Inmates are also provided information regarding the complaint process in the Whitehorse Correctional Centre Inmate Handbook and the Inmate Video. The physical inspection included the women's unit, D-G units, Arrest Processing Unit (APU), Segregation and Separate Living Unit (SLU).

Findings:

1. The current complaint process involves the administration making a copy of the response after a Deputy Superintendent review and or response and placing a copy under the inmate's last name in an alphabetized indexed binder referred to as the "Inmate Complaints Binder"; this binder is not separated into any type of timeframe (i.e. months).
2. Additional supporting evidence (video, incident reports, letters from Deputy Superintendent, etc.) that WCC uses for resolution or response to the inmate is not kept in the complaint folder, or in one specified location. ISO determined that supporting evidence could be found in a variety of places including the inmate's progress log, unit log, case manager's notes, shared drive, or USB.
3. In terms of monitoring open complaints, and open complaint timelines, the current process is for the officer that is holding the complaint form to respond as soon as possible and forward the form onto the next level of Management until it reaches final sign off by the Deputy Superintendent, or Superintendent. The Deputy or Superintendent then ensures that the form is forwarded back to the inmate through the Administrative assistant within 7 days. There is no electronic monitoring (except for the Inmate Complaint Form Log noted below) of the actual complaint itself that would help verify the dates that complaints are received by corrections staff and responded to, along with the response from Corrections staff or management. This would assist in monitoring whether or not responses

are received by the inmate within the timelines set by legislation. WCC has examined development of a system however; it has not yet been implemented.

4. WCC does not employ a system which uses an electronic complaint form where electronic responses can be saved.
5. The current Inmate Complaint Form Log was specifically developed by an administrative assistant for personal reference and tracking; it is unknown if this form will continue to be used as the developer has now taken on a new position at WCC.
6. ISO found that there is no documentation capturing when a response was provided to the inmate (i.e. progress log or electronically) and that a copy of completed complaint form was not always attached to inmate's progress log as per policy.
7. ISO letters of response that reply to a specific Inmate Complaint Form Number are not consistently being attached to the progress log. If such a system were employed it could be used as a cross-referencing tool that would allow all staff to review how a complaint was resolved, and answer any questions the inmates may have regarding the complaint.
8. Units D, E, F and G had appropriate ISO posters on the bulletin boards. Posters in some of the units use an outdated version and in some cases are covered with other bulletins. As well, bulletin boards were occasionally cluttered and ISO posters were covered over with other information material. All units had complaint forms and ISO envelopes readily available for inmates.
9. Of the 60 complaints reviewed as part of ISO's inspection from the time period of October 2013 to April 2014, there were four (4) complaints that were not returned to the inmate within a timely manner (6.7%).
10. ISO determined that nine (9) complaints could have been more appropriately resolved (15%); 2 of these complaints were from female inmates. ISO identified the following deficiencies in responses by Corrections staff:
 - a. The response did not address the issue, stating "limit complaint to one complaint" when there was only one issue identified in the original complaint.

- b. The response did not address the issue raised and could be deemed dismissive;
 - c. There was no explanation or reasons given for the response to the inmate;
 - d. The response did not provide enough information or feedback in one case concerning a sensitive issue, thus raising more questions by the inmate.
 - e. There were responses where no resolution was forthcoming for example, phrases such as “This will be resolved” or “Will discuss” were used.
 - f. The response did not appear to follow any investigation of the issue and did not resolve the matter.
 - g. A response asked an inmate for further information which was already accessible to WCC.
11. 15 complaints were forwarded to ISO for review (25%).
12. Five (5) complaints that were not resolved and where ISO believes the response from WCC was not adequate were forwarded by the inmate to ISO for review (8.3%)
13. Five (5) complaints that ISO believes were not an appropriate response/effective resolution from WCC were not forwarded by the inmate to ISO for review (8.3%)
14. Ten (10) complaints that ISO believes were an appropriate response/effective resolution from WCC were forwarded by the inmate to ISO for review (16.7%). Complaint forms are returned to the inmate; however, there is no system of documenting that the inmate has received the complaint form with a response from WCC.
15. With three levels of staff responding to a complaint in certain complaint forms received, ISO believes the responses could lead to confusion of the inmate. Each level may address the issue differently and there is also a potential for contradiction if each level responds; furthermore, there are instances where the MCS’s response is appropriate, but instead of approving the response, the Deputy Superintendent writes a response that does not address the complaint or provide a resolution.

16. Attachments, such as additional pages prepared by the inmate, are not kept with the complaint form that was filed. This results in WCC having to search numerous records/files in order to compile all documents relating to the complaint, including the inmate's progress log, unit logs, case manager's notes, or video footage on the shared drive or on a USB.
17. The steps taken to resolve the complaint are not often included in the response, and simply state that the Deputy Superintendent will resolve it or discuss it with the inmate; however, neither the steps taken to resolve nor the discussion/resolution is documented or attached on the complaint form.
18. All complaints were ultimately forwarded to the Deputy Superintendent for final review and or response. The Superintendent reviewed and approved 16 responses (26.7%) from the MCS, and provided a response for the remaining 44 complaints; 46 of the 60 (76.7%) complaints were not addressed at all at the living unit level and a common response by the unit officer was, "cannot be resolved at this level" or the unit officer didn't address the complaint appropriately.
19. WCC's trend analysis of the nature of the issues brought forward through the complaint process is ad hoc and anecdotal. ISO could not find a report capturing trends in complaints over time.
20. Out of the 32 female complaint forms submitted, ISO found that 36 complaint issues were identified. The most common complaints were regarding medical care, nine (25%); however, two of the six complainants made the majority of the medical complaints, and separate complaints by these individuals were regarding the same medical issue. The next predominate complaint was the quality of food; six complaints (16.7%) were made regarding the food, and spanned five separate female inmates. ISO found that trends analysis and the subject matter of complaints by female inmates at WCC did not reveal any specific gender-based issues or areas of concern and that the responses in the majority of cases were reasonable and appropriate.

Recommendations:

1. ISO recommends that Correction's management explore and implement a comprehensive electronic complaint system which tracks each complaint,

provides timelines for response, and is able to produce reports showing current caseload, responsible authority assigned to resolve the complaint, and trend analysis.

In the interim, Corrections management should develop a more efficient system for tracking complaints and related documentation which is centrally archived and organized by date.

2. In terms of documentation, ISO recommends the following:
 - a. Correction staff should record in the progress log when a complaint form is submitted and returned to inmate with responses.
 - b. That ISO responses are always placed in the inmate's progress log once received, along with a copy in the electronic file.
 - c. WCC management should ensure that consistent information regarding an inmate's complaint and response from WCC is provided to corrections officers working in the related unit. This would ensure that everyone interacting with the inmate is available to provide consistent information. This can be accomplished by always having the completed response form and documentation of the complaint process documented in the inmate's progress log
3. ISO recommends that Corrections management continue to provide appropriate training for all staff involved in the complaint system and that the training covers informal resolution of complaints in the first instance and, how to identify the issues and appropriately respond to inmates verbally and in writing. This would ensure improved competency of Corrections staff in addressing complaints at the earliest opportunity consistent with the Corrections Act and Standing Orders. As emphasized in the Correction Officers Basic Training (COBT) and ISO training, Unit officers should attempt to resolve complaints at the living unit level whenever it is reasonable and practical to do so.
4. In order that the ISO review process is understood, Correction's staff should ensure ISO information on bulletin boards is visible (do not cover ISO posters).
5. In addition to verbal updates, in order to ensure that all WCC staff are implementing policy and procedures consistently and are aware of changes, ISO recommends the development and implementation of a formal written

communication strategy for providing information about new or amended, policy, procedures and/or protocols.

6. ISO recommends that WCC review internal communications processes between levels of Corrections management and front line staff to ensure appropriate and timely follow up and resolution of complaints.

Part B : Long Term Confinement

Investigations and Standards – Long Term Confinement Review

On 7 November 2011 the Investigations and Standards Office (ISO) submitted an Inspection Report of the Whitehorse Correctional Centre (WCC) which focused on two areas of identified risk within the centre. One of the identified areas inspected was the use of segregation within the correctional centre including “disciplinary segregation”, “segregation pending a disciplinary hearing”, and “short-term separate confinement”, or “long-term separate confinement” The inspection reviewed inmate notification, file documentation and compliance with mandated review periods. Based on the inspection ISO made eight recommendations to WCC management, four of which related to the use of administrative confinement within the correctional centre.

On 31 May 2012, the ISO was requested to review long term confinement within WCC including; the circumstances, documentation requirement and management of persons placed on long term confinement. Particular attention focused on fairness, appeal processes, case management and transition planning for returning the inmate back to regular units. Based on the review six recommendations were made by ISO to WCC management.

On 7 April 2014 as part of a wider ISO inspection of Whitehorse Correctional Centre, a review was undertaken on the implementation of long term confinement including the implementation of all of prior ISO recommendations applicable for long term confinement.

Scope of Inspection:

This aspect of the inspection included a review into the circumstances, documentation requirement and management of persons placed on long term separate confinement including medical care provided to inmates for mental health purposes.

In order to undertake the inspection, ISO reviewed the files of inmates within WCC placed on long term confinement from April 2013 to April 2014.

All paperwork for each inmate held under the circumstances described above has been reviewed in accordance to CAR, and WCC policy, procedures and national best practices. Paperwork reviewed includes; inmate progress logs, long term confinement paperwork, documentation of reasons for confinement provided to inmate, documentation of reviews conducted by WCC, and interviews with all levels of staff.

For the purposes of this inspection, only incidents of long term confinement whereby inmates were held in the segregation unit under section 21 of CAR were examined.

The Investigation and Standards Office and Whitehorse Correctional Centre:

ISO was established in January 2010 with the proclamation of the new *Corrections Act and Regulation* and is mandated to provide independent oversight of the Corrections Branch.

Through the *Corrections Act and Regulation*, ISO has the mandate to carry out investigations and inspection of the Whitehorse Correctional Centre and report the findings and recommendations to the Corrections branch and Deputy Minister.

The investigation and inspection process undertaken by ISO:

- a) Provides assurance to the Department of Justice that operation of correctional facilities and programs are well managed, efficient and within the parameters of applicable laws, regulations and policies;
- b) Identifies weakness in operational or corrections practices, internal controls and management systems; and,
- c) Identifies opportunities, where applicable, to improve operational or correctional practices.

The Whitehorse Correctional Centre is the territorial correctional facility for adults. As the sole adult correctional facility in the territory it houses all security levels from minimum to maximum security inmates.

Those individuals who are residing in WCC have through the judicial process been deemed to pose a significant public safety risk and require incarceration until which time they are released to the community.

When ISO undertakes inspections and investigations of Whitehorse Correctional Centre it is understood that the very nature of residing in a correctional institution restricts an individual's liberty, freedom and movements and places constraints on individuals not found in the community.

It is also understood and recognised that individuals who reside within a correctional centre retain the rights of all members of society except those that are, as a consequence of the placement in a correctional institution, lawfully and necessarily restricted. That placement in a correctional institution does not mean total deprivation or forfeiture of rights and that by law, inmates within WCC maintain the right to be treated with dignity and respect, they have the right to safety and security of the person, to be treated humanely, to not be discriminated against and to be free from degrading, cruel and/or inhumane treatment or punishment. In accordance with the fundamental principles of the Corrections Act and Regulation, all restrictions placed on inmates should be the least restrictive possible.

The role of ISO is not to advocate on behalf of inmates or Corrections management but, as an independent and impartial body ensure that the decisions and practices within the correctional centre adhere to the Corrections Act and Regulations, WCC policy and procedures and are fair, reasonable, transparent, and ensure that the principles of natural justice prevails.

Definitions:

Administrative Separate Confinement: confinement of an inmate to prevent the inmate contact with general population which is not meant to be punitive in its nature. Includes: short term confinement, long term confinement, and voluntary confinement.

Separate Confinement: the custody of an inmate held in a cell within the Segregation Unit under the provisions of section 20-23 of the *Corrections Act and Regulations*.

Long Term Confinement: inmates held in a cell within the Segregation Unit under section 21 of the *Corrections Act and Regulations* for up to 15 days or more.

Long Term Confinement in WCC and CAR:

Separate confinement is a population management tool which is only to be used in accordance with the guidelines and purposes set out in *Corrections Act Regulation 2009* (CAR 2009), and when less restrictive alternatives have been exhausted or rendered ineffective.

Separate confinement within Whitehorse Correctional Centre is a mechanism for separating inmates from one another in an environment that provides higher levels of security and physical separation while increasing opportunities for observation by the correctional centre. The reason(s) for separate confinement fall into two categories: a) disciplinary confinement, or b) administrative confinement.

Disciplinary separate confinement is a sanction that is intended to have a punitive value and is imposed upon those individuals who have been: charged and found guilty of a breach of rule outlined within CAR; or those identified to be separately confined pending a disciplinary hearing for a breach of rule.

Administrative separate confinement is an offender management tool used to separate an inmate from the general population but is not meant to be punitive in its nature. Administrative separate confinement can be further divided into voluntary and involuntary separate confinement. Voluntary separate confinement involves the inmate choosing to be removed from general population and confined separately whereas involuntary separate confinement (long term confinement) is when an inmate is placed in separate confinement at the discretion of the person in charge.

Long term confinement is often used as a means to prevent harm to the inmate through their own actions or other actions of other individuals in the general population; or to prevent harm to other people in residing, working or visiting the correctional centre through the actions or behaviours of the inmate on long term confinement.

Long term confinement is typically used when the issue which is justifying the confinement is chronic, high risk and unlikely to change dramatically in a short period of time. Long term confinement should not be used to replace or circumvent disciplinary procedures which exist within the correctional centre, nor should it be used as a substitute for appropriate long-term mental health care. Inmates who are placed in separate confinement should be returned to general population at the earliest opportunity.

Under section 21 of CAR the person in charge may extend the order to confine an inmate separately for one or more periods not longer than 15 days each. The order to extend can only be made provided that the circumstances for separate confinement are reviewed *prior* to the expiry of the existing confinement period and it is determined that the circumstances which justified the order still exist. Under CAR there is no maximum number of times which section 21 can be renewed.

Under CAR, an inmate who is placed on long term confinement must be provided in writing, a) the reason for their confinement, b) the length of time they will be separately confined, and c) the reason for the length they will be confined. An inmate must be given reasonable opportunity to make submissions about why the separate confinement should not continue and/or why it should be for a shorter period of time. After considering the inmate's submission, the person in charge may confirm their decision, vary their decision or rescind their decision, and must notify the inmate of their decision with reasons in writing.

Individuals placed on long term confinement within the Whitehorse Correctional Centre are removed from general population units and placed into a segregation unit. For female prisoners the segregation unit is located on the third floor of the Women's unit and not accessible by other inmates in the unit. For male inmates, the segregation unit is located on the third floor of the correctional centre adjacent to the special living unit but separated by a central control booth for the two units.

Under CAR, administratively segregated inmates should receive the same rights, privileges, and conditions of confinement as the general population inmates, with the exception of those that cannot reasonably be provided because of security and/or safety concerns and/or the limitations of the segregation unit.

The male segregation unit consists of seven cells; six are single occupant cells and one is a negative pressure double occupant cell. The female segregation unit consists of five cells, two of which are negative pressure cells¹. Unlike the male segregation unit, all cells in the female unit are single occupant. All segregation unit cells are the same size

¹ Negative pressure cells aid in the prevention of air-borne pathogens such as TB. Negative pressure is created by balancing the room's ventilation system so that more air is mechanically exhausted from a room than is mechanically supplied. This creates a ventilation imbalance, so that air flows from the corridors, or any adjacent area, into the negative pressure room, ensuring that contaminated air cannot escape from the negative pressure room to other parts of the facility.

and similar configuration as a regular cell in a general population including having an exterior window. Unlike general population unit cells, segregation cells have a steel door with window and built-in security cameras in the cell. The fixtures in the segregation cells are stainless steel rather than porcelain and there is no desk or TV in the cell. Like regular living unit cells, the overhead lighting in the segregation unit cells is turned off during the night. The differences between regular living unit cells and segregation unit cell are for safety, security and health reasons and are consistent with the purpose of the segregation unit providing higher levels of security while increasing opportunities for observation by the correctional centre.

Both the female and male segregation units are self-contained units which include; shower facilities, a telephone and “fresh air yard”. When inmates are unlocked from their segregation cell, they have unrestricted access to these amenities the same as they would in a regular living unit unless security protocols are in place regarding access.

Inmates within segregations units are unlocked for a minimum of one hour a day. Based on individual circumstances and the operational requirements of the WCC and the segregation unit, inmates may be provided additional time out of their cells at the discretion of WCC management.

Findings:

1. From April 2013 to April 2014, three inmates were placed on long term confinement within Whitehorse Correctional Centre under section 21 of CAR.
2. Of the three of inmates placed on long term confinement one inmate was female.
3. One inmate was placed on long term confinement for significant behavioural issues which posed a safety risk to other inmates, staff and the security of the institution; one inmate was placed on long term confinement because they posed a risk to themselves; and one inmate was placed on long term confinement due to the risk of harm posed by other inmates if placed in general population.

4. The length of time inmates were placed on long term confinement under section 21 ranged from 2 days to 79 days². The longest consecutive time spent under section 21 by an inmate was 38 days.
5. While an inmate did spend 79 days under section 21 it should be noted that the individual was regularly changing between, short term confinement (section 20), long term confinement (section 21), confinement pending disciplinary hearing (section 28) and disciplinary confinement (section 33). The total combined time spent outside of a general population unit (either in the segregation unit or special living unit) by this inmate was significant and the 79 days spent under section 21 only represents a small portion of their year that they have been placed on administrative or disciplinary confinement.
6. In order to undertake the review of long term confinement, ISO requested access to all files pertaining to inmates who had been placed on separate confinement under section 21 of CAR in the identified time frame. In order to obtain this information, corrections relied on anecdotal knowledge of who had been in the segregation unit and then reviewed individual files to determine more specific information about what section the inmates had been placed on. An excel spreadsheet had at one time been developed to capture all inmates placed in the segregation unit, but the document had not been kept up to date. In addition, information pertaining to the inmate's separate confinement is kept in the individual inmate's progress logs, unit logs, case manager's database, g-drive and emails. As a result, in order to obtain information about an inmate's long term separate confinement, information had to be collected from a number of different sources which was both time consuming and could lead to information being missed or overlooked. For these reasons ISO finds there is no centralized record system for documenting all individuals who have been placed on long term confinement.
7. All previous ISO recommendations regarding long term confinement have been incorporated into WCC policy. WCC policy revised August 22 2013 clearly outlines the process which is used to govern whether an inmate is placed on long-term confinement, including what information will be used to determine

² Only placements under section 21 of CAR have been reviewed as part of this review. This review does not take into account time spent on section 20 short term confinement (up to 72 hours) or time spent on section 28 confinement pending disciplinary hearing or section 33 disciplinary confinements.

whether long term confinement is warranted, who is responsible for completing reviews and when reviews will be completed.

8. Through interviews with WCC staff, ISO is satisfied that daily discussions are taking place between WCC management, case managers and medical personnel in relation to inmate placement on or renewal of long term confinement.
9. In terms of the documentation of the reasons provided for long term confinement in the cases reviewed, in some instances, the Separate Confinement Form did not provide an explanation as to the reasons why an individual was placed on long term confinement. Instead the separate confinement form quoted the section of the Correction Act which allowed for placement on long term confinement without providing any further information. This is contrary to WCC policy which clearly states: "... the appropriate paperwork must be completed with the reasons given in writing as to why the inmate has been placed in separate confinement. It is not sufficient to only quote the regulations".
10. WCC policy states: "Before the expiration of the 72 hours short-term confinement period, a case manager will review the reasons why the inmate was placed on short-term confinement, determine if the reasons still exist and make recommendations to the Deputy Superintendent whether to remove the inmate from separate confinement or to place the inmate on long-term confinement. The case manager's review, with reasons, must be documented in the progress log and electronic file". On review of inmate files, it is clear that the documentation requirements outlined within WCC policy are not being adhered to in all cases. No files contained written documentation providing recommendations for the transition from short term to long term confinement. Only one file contained written documentation providing recommendation for the renewal of long term confinement, but the documentation was not present for each renewal of long term confinement over the duration which the inmate was held under Section 21.

When long term confinement review documents were completed they did clearly demonstrate the reasons why placement or continuation on long term confinement were warranted and or justified in addition to what work was undertaken to move an individual off long term confinement.

11. WCC policy states, "A case manager will meet once every 3 days with all inmates placed on long-term separate confinement, and document a summary of the meetings in the progress log". There was insufficient documentation of

meetings with inmates on long term confinement to be able to verify that the timelines identified within WCC policy were being met. On review of case manager notes it was clear that for one inmate case managers were reviewing the inmate's progress log on a daily basis but the requirement of face to face meetings set out under WCC policy was not documented.

12. On reviewing inmate files, it is very evident that the individual needs of inmates are being taken into account while on long term confinement. There is clear evidence through the use of inmate protocols that WCC is working to ensure that inmates on long term confinement are receiving specialized care and that their conditions of confinement are the least restrictive they can be while taking into account the security risk posed by the individual, and the need to protect the individual from themselves in addition to protecting staff and other inmates from harm.
13. However, ISO has identified a number of gaps in WCC compliance with written policy. WCC policy states: "Case managers will meet with all inmates placed on long-term confinement and develop a separate confinement transition plan to reintegrate the inmate back into a regular living unit. Transition plans will outline actions and programs the inmate requires prior to returning to a regular living unit". No transition plan as described in the WCC policy was found in any of the three inmate files reviewed.
14. WCC policy states that: "All inmates placed on long-term confinement will be provided written reasons, given a verbal explanation for their confinement and provided opportunity to ask questions about justifications for confinement". Based on interviews with staff ISO understands that when inmates receive their separate confinement paperwork there is the opportunity to speak with inmates regarding their confinement. However ISO was unable to confirm whether all inmates who were placed on long term confinement were given a verbal explanation for their placement or provided the opportunity to ask questions about the justifications for their confinement, as there was no documentation that these discussions took place.
15. The written progress log files do not appear to be kept in a standardized format: the location where information is kept in the progress log and the type of information retained can change from file to file. This is particularly noticeable when reviewing progress log files for inmates that have more than one volume. It is also not uncommon to find loose paper within the file that has either been

inserted without being physically secured into the file; has been torn out of the file, and or pertains to another inmate. In addition, ISO found that the dates identified on the volume file did not always correspond to the information contained in the file. For example, information from 2014 was found in a volume which was closed in 2011.

16. WCC policy states: “Officers must document in the progress log of all inmates on separate confinement each shift. Documentation will include, but not be limited to ...any staff or health care professional or visitor entering the unit to see the inmate...” Based on a review on inmate files there are inconsistencies in the documentation regarding this information in the inmate’s progress log.
17. On reviewing inmate files it is clear that the medical requirements including an inmate’s mental health are being continuously monitored and addressed by WCC. This includes access to medical staff four times a day during medical rounds, and referrals to psychologist and psychiatrist.
18. The medical/ observation forms document the daily event and issues of inmates on long term confinement including, offers and acceptance of showers and fresh air time. The level of detail contained in these documents provides clear insight into the treatment and care of the inmate while held on long term confinement.
19. Medical staff attends daily morning management briefings where inmates who are of interest are discussed, including those on long term confinement. Medical staff is also provided daily shift reports to the nursing staff which highlight inmate movement within the centre.
20. In the 2012 ISO recommended: “...WCC management ensure doctors and medical staff have care plans in place for inmates on long term confinement...”. The intention of this recommendation was to ensure a base line assessment of the inmates wellbeing could be taken when the individual was first placed on long term confinement and reviewed as their confinement progressed to ensure any deterioration of the individual’s wellbeing would be identified at the earliest opportunity. WCC policy states: “Nursing staff will develop a standardized assessment procedure to ensure a care plan for each inmate based on their individual needs”. Based on interviews with nursing staff, ISO was unable to determine whether the standardized assessment procedure was created or whether care plans for inmates placed on long term confinement are being completed.

21. As well, based on discussions with WCC medical staff it appears that medical staff are not aware of the roles and responsibilities outlined for nursing staff under the B.4.3 Separate Confinement Policy.
22. ISO understands that referrals to a contract psychologist and/or psychiatrist are being made however they are not documented in a consistent manner or location. References to referrals were made in a variety of locations including case manager notes, progress logs, information reports and emails. Accordingly there was no consistent practice of recording referrals so that the information with respect to a particular inmate could be readily retrieved.
23. Inmate files clearly show that inmates who are placed on long term confinement are being transitioned back into regular living units or the special living unit as soon as possible and are not being held for the maximum time allowed under CAR of 15 days before reviews are undertaken. This shows that WCC has made efforts to assess an inmate's placement on long term confinement and the need for the placement. Improved documentation by WCC of decisions to end long term confinement would also be an asset.
24. Based on the potential for the segregation unit to house high risk individuals such as those who have significant behavioural issues; are at risk of serious self-harm or have other mental health or cognitive issues; ISO feels that the segregation unit is one of the "high risk" areas within the correctional centre and requires highly competent staff.

Recommendations:

1. ISO recommends that WCC consider developing a centralized database such as an integrated case management system for inmate files. The centralized database would enable access to all logged client information in one place, provide real time information access, allow for task coordination, search and reporting tools and enable greater transparency and accountability. A centralized database would also allow for a reduction in hard copy paper within WCC.

At a minimum, ISO recommends that WCC implement a central system for documenting all inmates placed on long term confinement, reasons for placement or continuance of long term confinement, and next review date.

2. In terms of written documentation ISO recommends that WCC consider the following:
 - a. WCC improve the written documentation which justifies long term confinement placement such as creating a “Record of Decision” document. ISO recommends that the improved documentation for placement or extension of long term confinement should at minimum: identify who participated in the decision; identify what information was used as part of the decision making process; identify any concerns raised by participants and, document what steps are going to be taken by WCC to help transition the inmate back to a regular living unit.
 - b. A full description of the incident or circumstances leading to the decision for placement or extension of long term confinement should be documented in writing, placed in the inmate’s progress log and provided to the inmate in addition to their long term confinement paperwork.
 - c. Written documentation is created to identify what alternatives to long term confinement were considered and identify reasons why alternative placements were not viable. ISO recommends that this written documentation be placed in the inmate’s progress log.
 - d. Every time an offer to refer an inmate or a referral is made to a contract psychologist or psychiatrist that a “Notice of Referral” document is created and placed in the inmate’s progress log. The “Notice of Referral” document should indicate at minimum: the date the referral is made or request, who initiated the referral (i.e. request by inmate or offer by WCC staff); reason for referral; and who the referral was made to.
 - e. A standardised letter is created by WCC management to ensure that an inmate understands their right to make submissions about why separate confinement should not be continued or why it should be for a shorter period of time under section 21(3)(b) of CAR. ISO recommends that this letter is provided to the inmate every time they receive long term confinement paperwork.

- f. Medical / observation forms could be completed by segregation unit staff for all individuals placed in the unit under section 21 due to the small number of individuals who are placed on section 21.
 - g. All visits to an inmate held on section 21 by a member of WCC staff (management, case managers and nursing) are logged in the inmate's progress log or medical observation sheet.
3. ISO recommends that, WCC consider using a different colour of paper (i.e. yellow) for progress log entries made in the Segregation Unit. This would allow for Segregation Unit progress log entries to be easily identifiable and allow for more timely review.
4. ISO recommends that, in addition to the existing avenues of complaint to the person in charge and request for review by ISO which are available to inmates in separate confinement, Corrections should examine possible models of mandatory independent review of the reasons for continuation of separate confinement at specific intervals. ISO believes that this would enhance the existing system by providing greater transparency around decision making and an additional mechanism of independent review.
5. In order to ensure that inmate files are easily accessed, ISO recommends that WCC develop a file logging system which would enable files to be "checked out". The logging system should identify, the date when the file was requested, the date it was received, the identity of the individual using the file, the purpose of the file request and the date it was returned.
6. ISO recommends that WCC review their Separate Confinement Policy and Mental Health Policy regarding what is required of nursing staff for individuals placed on long term confinement and ensure that the policies and procedures and roles and responsibilities identified are consistent in both documents. As a quality assurance measure ISO recommends that it is clearly communicated that all WCC staff including medical staff are responsible for knowing all WCC operational policy and procedures.
7. Correctional Service Canada's Administrative Segregation Commissioner's Directive requires an "Inmate Needs Checklist" to be completed upon admission to administrative segregation or when the reasons for placement in administrative segregation are changed. In addition, a psychologist must provide a written

opinion on the inmate's mental health status within the first 25 days of the initial placement on administrative segregation and then once every subsequent 60 days. The use of the initial needs check list and regular reviews helps to set a base line of the inmate's mental health and regularly monitor an inmate's mental health while administratively confined. ISO recommends that WCC undertake a review of other correctional institution's processes for reviewing mental health for administratively confined inmates to ensure WCC policy and procedure are in line with best practice.

8. In addition to verbal updates, in order to ensure that all WCC staff are implementing policy and procedures consistently and are aware of changes, ISO recommends the development and implementation of a formal written communication strategy for providing information about new or amended, policy, procedures and/or protocols.
9. As the segregation and special handling units are one of the "high-risk" areas within the correctional centre, ISO recommends that individuals working within the unit receive regular and ongoing specialized training based on the needs of the unit, which could include regular review of the unit's policies and procedure. ISO also recommends that only those individuals who are physically fit and meet identified training requirements be allowed to work in the unit.

Appendix

APPENDIX A

Complaints ISO Reviewed

Complaint Number (Month/Yr)	Timely Response(7 days according to CAR)(Yes/No)	Appropriate Response /Effective Resolution(Yes/No)	Request for a review through ISO/Inquiry(yes/no)
02547(Oct 2013)	Yes	No	Yes
03555(Oct 2013)	Yes	Yes	No
03901(Oct 2013)	Yes	Yes	No
02388(Oct 2013)	No	Yes	No
02519(Oct 2013)	Yes	Yes	No
**03125(Oct 2013)	U/K (No Date)	Yes	No
03362(Oct 2013)	Yes	No	Yes
02883(Oct 2013)	Yes	Yes	No
02540(Oct 2013)	No	Yes	No
02643(Oct 2013)	Yes	No	Yes
03921(Nov 2013)	Yes	Yes	No
02566(Nov 2013)	Yes	Yes	No
02565(Nov 2013)	Yes	Yes	No
03903(Nov 2013)	Yes	Yes	Yes
03932(Nov 2013)	Yes	Yes	Yes
02581(Nov 2013)	Yes	Yes	Yes
02875(Nov 2013)	Yes	Yes	No

ISO
INVESTIGATIONS
& STANDARDS OFFICE

**02832(Nov 2013)	Yes	No	No
03931(Nov 2013)	Yes	Yes	Yes
03965(Nov 2013)	Yes	Yes	No
02568(Dec 2013)	Yes	Yes	No
Complaint Number (Month/Yr)	Timely Response(7 days according to CAR)(Yes/No)	Appropriate Response /Effective Resolution(Yes/No)	Request for a review through ISO/Inquiry(yes/no)
03466(Dec 2013)	Yes	Yes	No
**02839(Dec 2013)	Yes	No	No
02847(Dec 2013)	Yes	Yes	No
03468(Dec 2013)	Yes	Yes	Yes
02569(Dec 2013)	Yes	Yes	No
02593(Dec 2013)	Yes	Yes	No
03485(Dec 2013)	Yes	Yes	Yes
02590(Dec 2013)	Yes	Yes	No
03402(Dec 2013)	Yes	Yes	No
03330(Jan 2014)	Yes	No	Yes
03327(Jan 2014)	Yes	Yes	No
03160(Jan 2014)	Yes	Yes	No
03410(Jan 2014)	Yes	No	Yes
03205(Jan 2014)	Yes	No	No
03349(Jan 2014)	Yes	Yes	No

ISO
INVESTIGATIONS
& STANDARDS OFFICE

**03495(Jan 2014)	Yes	Yes	Yes
03453(Jan 2014)	Yes	Yes	No
03458(Jan 2014)	Yes	Yes	No
03238(Jan 2014)	Yes	Yes	No
03284(Feb 2014)	Yes	Yes	No
03291(Feb 2014)	Yes	Yes	No
03268(Feb 2014)	Yes	Yes	No

Complaint Number (Month/Yr)	Timely Response(7 days according to CAR)(Yes/No)	Appropriate Response /Effective Resolution(Yes/No)	Request for a review through ISO/Inquiry(yes/no)
**03806(Feb 2014)	Yes	Yes	No
**03832(Feb 2014)	Yes	Yes	No
03358(Feb 2014)	Yes	Yes	Yes
03428(Feb 2014)	Yes	Yes	Yes
03357(Feb 2014)	No	Yes	No
03017(Feb 2014)	Yes	Yes	No
03356(Feb 2014)	Yes	Yes	No
03225(Mar 2014)	Yes	Yes	No
03296(Mar 2014)	Yes	Yes	No
03214(Mar 2014)	Yes	Yes	No
04133(Mar 2014)	Yes	Yes	No
02926(Mar 2014)	Yes	Yes	Yes

ISO
 INVESTIGATIONS
 & STANDARDS OFFICE

03353(Mar 2014)	Yes	Yes	No
02928(April 2014)	Yes	Yes	No
03447(Mar 2014)	No	Yes	No
02924(April 2014)	Yes	Yes	No
03154(Mar 2014)	Yes	No	No
Total	4 No	9 No	15 Yes ISO review

**** Female Inmate**

APPENDIX B

WCC Complaints 2013

MONTH	NUMBER OF COMPLAINTS
January	54
February	47
March	66
April	59
May	37
June	36
July	79
August	22
September	21
October	44
November	62
December	26
Undated	18
TOTAL	570

APPENDIX C

ISO 2014 Inspection Recommendation Table

Part A: Complaints:

ISO Recommendation	
1	<p>ISO recommends that Correction’s management explore and implement a comprehensive electronic complaint system which tracks each complaint, provides timelines for response, and is able to produce reports showing current caseload, responsible authority assigned to resolve the complaint, and trend analysis.</p> <p>In the interim, Corrections management should develop a more efficient system for tracking complaints and related documentation, which is centrally archived and organized by date.</p>
2	<p>In terms of documentation, ISO recommends the following:</p> <ul style="list-style-type: none"> a. Correction staff should record in the progress log when a complaint form is submitted and returned to inmate with responses. b. That ISO responses are always placed in the inmate’s progress log once received, along with a copy in the electronic file. c. WCC management should ensure that consistent information regarding an inmate’s complaint and response from WCC is provided to corrections officers working in the related unit. This would ensure that everyone interacting with the inmate is available to provide consistent information. This can be accomplished by always having the completed response form and documentation of the complaint process documented in the inmate’s progress log
3	<p>ISO recommends that Corrections management continue to provide appropriate training for all staff involved in the complaint system and that the training covers informal resolution of complaints in the first instance and, how to identify the issues and appropriately respond to inmates verbally and in writing. This would ensure improved competency of Corrections staff in addressing complaints at the earliest opportunity consistent with the Corrections Act and Standing Orders. As emphasized in the Correction Officers Basic Training (COBT) and ISO training, Unit officers should attempt</p>

	to resolve complaints at the living unit level whenever it is reasonable and practical to do so.
4	In order that the ISO review process is understood, Correction’s staff should ensure ISO information on bulletin boards is visible (do not cover ISO posters).
5	In addition to verbal updates, in order to ensure that all WCC staff are implementing policy and procedures consistently and are aware of changes, ISO recommends the development and implementation of a formal written communication strategy for providing information about new or amended, policy, procedures and/or protocols.
6	ISO recommends that WCC review internal communications processes between levels of Corrections management and front line staff to ensure appropriate and timely follow up and resolution of complaints.

Part B: Long Term Confinement

ISO Recommendation	
1	<p>WCC consider developing a centralized database such as an integrated case management system for inmate files. The centralized database would enable access to all logged client information in one place, provide real time information access, allow for task coordination, search and reporting tools and enable greater transparency and accountability. A centralized database would also allow for a reduction in hard copy paper within WCC.</p> <p>At a minimum, WCC implement a central system for documenting all inmates placed on long term confinement, reasons for placement or continuance of long term confinement, and next review date.</p>
2	<p>In terms of written documentation ISO recommends that WCC consider the following:</p> <ul style="list-style-type: none"> a. WCC improve the written documentation which justifies long term confinement placement such as creating a “Record of Decision” document. ISO recommends that the improved documentation for placement or extension of long term confinement should at minimum: identify who participated in the decision; identify what information was used as part of the decision making process; identify any concerns raised by participants and, document what steps are going to be taken by

	<p>WCC to help transition the inmate back to a regular living unit.</p> <ul style="list-style-type: none"> b. A full description of the incident or circumstances leading to the decision for placement or extension of long term confinement should be documented in writing, placed in the inmate’s progress log and provided to the inmate in addition to their long term confinement paperwork. c. Written documentation is created to identify what alternatives to long term confinement were considered and identify reasons why alternative placements were not viable. ISO recommends that this written documentation be placed in the inmate’s progress log. d. Every time an offer to refer an inmate or a referral is made to a contract psychologist or psychiatrist that a “Notice of Referral” document is created and placed in the inmate’s progress log. The “Notice of Referral” document should indicate at minimum: the date the referral is made or request, who initiated the referral (i.e. request by inmate or offer by WCC staff); reason for referral; and who the referral was made to. e. A standardised letter is created by WCC management to ensure that an inmate understands their right to make submissions about why separate confinement should not be continued or why it should be for a shorter period of time under section 21(3)(b) of CAR. ISO recommends that this letter is provided to the inmate every time they receive long term confinement paperwork. f. Medical / observation forms could be completed by segregation unit staff for all individuals placed in the unit under section 21 due to the small number of individuals who are placed on section 21. g. All visits to an inmate held on section 21 by a member of WCC staff (management, case managers and nursing) are logged in the inmate’s progress log or medical observation sheet.
<p>3</p>	<p>ISO recommends that, WCC consider using a different colour of paper (i.e. yellow) for progress log entries made in the Segregation Unit. This would allow for Segregation Unit progress log entries to be easily identifiable and allow for more timely review.</p>
<p>4</p>	<p>ISO recommends that, in addition to the existing avenues of complaint to the person in charge and appeal to ISO which are available to inmates in separate confinement, Corrections should examine possible models of mandatory independent review of the reasons for continuation of separate confinement at specific intervals. ISO believes that this would enhance the existing system by providing greater transparency around decision making and an additional mechanism of independent review.</p>

5	In order to ensure that inmate files are easily accessed, ISO recommends that WCC develop a file logging system which would enable files to be “checked out”. The logging system should identify, the date when the file was requested, the date it was received, the identity of the individual using the file, the purpose of the file request and the date it was returned.
6	ISO recommends that WCC review their Separate Confinement Policy and Mental Health Policy regarding what is required of nursing staff for individuals placed on long term confinement and ensure that the policies and procedures and roles and responsibilities identified are consistent in both documents. As a quality assurance measure ISO recommends that it is clearly communicated that all WCC staff including medical staff are responsible for knowing all WCC operational policy and procedures.
7	Correctional Service Canada’s Administrative Segregation Commissioner’s Directive requires an “Inmate Needs Checklist” to be completed upon admission to administrative segregation or when the reasons for placement in administrative segregation are changed. In addition, a psychologist must provide a written opinion on the inmate’s mental health status within the first 25 days of the initial placement on administrative segregation and then once every subsequent 60 days. The use of the initial needs check list and regular reviews helps to set a base line of the inmate’s mental health and regularly monitor an inmate’s mental health while administratively confined. ISO recommends that WCC undertake a review of other correctional institution’s processes for reviewing mental health for administratively confined inmates to ensure WCC policy and procedure are in line with best practice.
8	In addition to verbal updates, in order to ensure that all WCC staff are implementing policy and procedures consistently and are aware of changes, ISO recommends the development and implementation of a formal written communication strategy for providing information about new or amended, policy, procedures and/or protocols.
9	As the segregation and special handling units are one of the “high-risk” areas within the correctional centre, ISO recommends that individuals working within the unit receive regular and ongoing specialized training based on the needs of the unit, which could include regular review of the unit’s policies and procedure. ISO also recommends that only those individuals who are physically fit and meet identified training requirements be allowed to work in the unit.