Woodbourne Correctional Facility
Humane Alternatives to Long-Term Solitary Confinement (HALT)
Final Compliance and Quality of Care Review
JC#: 77010182875

On December 29, 2025, the Justice Center for the Protection of People with Special Needs (the Justice Center) conducted a site visit at the Woodbourne Correctional Facility (CF) to review the programs, treatment and conditions of confinement for incarcerated individuals placed in residential rehabilitation unit in that facility. The Justice Center also assessed compliance with the implementation of the HALT Act.[1]

The Justice Center reviewed policies and practices concerning:

a) Placement of persons in segregated confinement and residential rehabilitation units (RRU);
b) Placement and treatment of persons meeting the "special population" definition in the HALT Act;[2]
c) Length of time spent in segregated confinement or residential rehabilitation units;
d) Hearings and procedures;
e) Assessments and rehabilitation plans, procedures and discharge determinations.

The Justice Center toured the Special Housing Unit (SHU) and spoke with nine incarcerated individuals in the SHU.[3] In addition to reviewing the OMH clinical case record and DOCCS guidance record, the Movement Logs and Programming Logs, the Justice Center also requested any Exceptional Circumstances documentation for a time-period of six months.[4] The Justice Center's review found that there were no individuals placed on exceptional circumstances during this review period.

To complete a thorough evaluation, Justice Center staff requested private interviews with all nine individuals in the SHU, and four incarcerated individuals accepted. The interviews were conducted in a private room in the Woodbourne CF SHU building. The Justice Center's findings, recommendations and requests follow below.

[1] Correction Law §§137(6)(d)(e) (h), (i), (j), (k), (l), (m), (n), and (o) and §§138 (7), 401-a.
[2] Section 2 of the Correction Law, subdivision 33 defines Special Population as any person twenty-one years of age or younger; fifty-five years or older; with a disability; pregnant, in the first 8 weeks of post-partum recovery or caring for a child in a correctional facility.
[3] The Justice Center was informed that four of the individuals housed in the Woodbourne CF SHU were "owned" by Wallkill CF.
[4] June 29, 2025 – December 25, 2025

Justice Center Findings

Treatment and Conditions:

1. **There were no incarcerated individuals attending out-of-cell programing in the SHU.**

   The Woodbourne CF SHU is on the third floor of building 4 of the correctional facility. Upon entering the unit there is a main hallway with ten single-occupancy cells, a private interview room, and security staff desk. At the end of the unit's main hallway, to the left, there is an open classroom-type room with six Reduced Security Therapy and Recreation Table (RESTART) chairs, where programming and congregate recreation is held. At the end of the hallway to the right, there are three single occupancy cells and an additional recreation area that is not in use. On the day of the site visit the census provided by DOCCS indicated there were a total of nine individuals in SHU and Justice Center staff were able to speak cell side with all individuals.

   The Justice Center was provided with the orientation manual provided to incarcerated individuals upon admission to the SHU. [5] The manual indicates that individuals can request "recreation, showers, supplies, program and meal choice" during the 7:30 a.m. go-around. Security staff reported that programming is held from about 7:45 a.m. to 10:45 a.m. and that most individuals housed in the Woodbourne CF SHU are uninterested in attending programming. On the day of the visit there were no incarcerated individuals attending out-of-cell programming.

   The manual also states that individuals are to be offered at least four hours of out-of-cell programming per day, "including at least three hours for programs and one hour for exercise". The Justice Center was not provided with Woodbourne CF SHU attendance records for out-of-cell programming following the site visit, therefore an analysis of accepted out-of-cell programming could not be completed.[6] Per the Justice Center's request, DOCCS forwarded the SHU Activity Logs for December 15, 2025, through December 29, 2025, which indicated that individuals refused out-of-cell programming attendance during that time period. During private interviews, three out of four individuals reported that they are offered programming daily. Based on our previous review, the Justice Center learned that only one incarcerated individual attended out-of-cell programming within a two-week period of December 2024. Additionally, there were five days in the month of January 2025 that show

[5] Woodbourne Correctional Facility SHU Orientation Manual dated January 22, 2025.
[6] The Justice Center requested program attendance records on December 29, 2025.

individuals attended out-of-cell programming, with an average of two individuals attending each session.[7]

Per facility staff, recreation is offered around 12:00 p.m., for one hour. Recreation for individuals housed in the SHU is congregate, up to four individuals are permitted to be out at the same time. Each recreation area was a large outdoor rectangular space, with one pull-up bar available. Regarding tablets, the orientation manual states that static tablets are "issued on Tour III for two hours from 6:00 p.m. to 8:00 p.m." However, security staff verbally reported that static tablets are distributed to individuals around 7:45 a.m. and collected at approximately 10:45 a.m. and are distributed again from about 6:00 p.m. to 8:00 p.m. During private interviews with incarcerated individuals, three individuals report that tablets were distributed around 8:00/9:00 a.m. and collected around 10:00 p.m.

The Justice Center requested the most current program schedule, as well as the February 2026 program attendance records for out-of-cell programming and congregate recreation. The current out-of-cell programming schedule is a morning session from 7:45 a.m. to 10:45 a.m., and an afternoon session from 11:45 a.m. to 2:45 p.m. A review of these records determined that in the month of February 2026, there were seven days when individuals attended out-of-cell programming.[8] The highest day of attendance was February 24, 2026, with five individuals in attendance. The monthly average programming attendance was less than one individual per day. It was also determined that there were 23 days when individuals attended recreation, with the highest days of attendance being February 11 and 12, 2026, both days having seven individuals in attendance. The monthly average recreation attendance was three individuals.

Recommendation:

The Justice Center continues to recommend that DOCCS staff provide quality programs consistent with those in general population and provide incentives to encourage incarcerated individuals to attend and engage in programming. While it is understood that individuals are not housed in the SHU for an extended period, DOCCS and OMH staff should attempt to debrief with them about their disciplinary sanction while in confinement and assist in preparing them for the transition to a Residential Rehabilitation Unit (RRU). Additionally, though the Justice Center commends Woodbourne staff for offering individuals additional time to access static

[7] The Justice Center's Final HALT Report following a December 11, 2024, site visit to the Woodbourne CF.
[8] Days of Attendance: 2/17/26 - 2 individuals in attendance, 2/18/26 - 1 individual, 2/19/26 3 individuals, 2/20/26 - 3 individuals, 2/24/26 - 5 individuals, 2/25/26 - 2 individuals, 2/27/26 - 2 individuals.

tablets, it is recommended that tablets not be offered at the same time as out-of-cell programming as it could discourage attendance.

2. **The Justice Center staff completed private interviews with four individuals.**

   All the individuals that accepted a private interview with Justice Center staff indicated they were not on the mental health caseload except for one.[9] All individuals reported that they had the opportunity to speak with mental health staff daily and were aware of how to access mental health staff in a timely manner if needed. Three of the individuals reported that despite being offered out-of-cell program daily they do not attend. One individual reported that they are not offered out-of-cell programming.

   All individuals reported that this was the first time they had been in confinement in six months. When questioned about their disciplinary hearings, one individual stated that they did not have the opportunity to request representation though records indicate they did have Tier Assistance for their hearing. Two other individuals reported that they did have the opportunity to request representation for assistance with their hearing proceedings, with one further reporting that they were unable to secure legal representation prior to their hearing concluding.

3. **The Justice Center received three surveys out of the nine that were distributed to incarcerated individuals on the day of the site visit.**

   Nine surveys were distributed by security staff to the incarcerated individuals in the SHU on the day of the site visit. Justice Center staff confirmed during cell-side interviews that all individuals had been provided with a survey. At the time of this report, three surveys were received.

   One individual reported being offered program daily, one individual reported never being offered program, and one individual did not respond. Two out of three individuals reported never attending out-of-cell programming and did not know who provides programming or the names of the programs offered. In response to the statement “I find the programming to be helpful to me,” one individual agreed, and one individual strongly disagreed. Further regarding programming one individual reported they believe there to be no benefit to programming in the SHU as individuals do not receive incentives and it “doesn’t count for nothing”. When asked

[9] One individual reported to Justice Center staff that they were receiving mental health services; however, they were determined to not be on the mental health caseload following a clinical record review.

what types of programs they would like to see offered individuals reported they would like to see ART, exercise-related programming and “any” type of programing.

Two individuals reported being offered the tablet daily for between 4-6 hours. One individual reported being permitted to have access to a tablet on days they attend programming and the other individual reported they were not permitted tablet access on these days. Two out of three individuals reported being offered recreation daily and one individual reported being offered recreation 4-5 days per week. One individual reported being offered between 2-4 hours of recreation and the other two individuals reported being offered less than 2 hours. Individuals reported that recreation is either congregate or a combination of congregate or individual recreation.

Recommendation:

Based on responses in private interviews and surveys there appears to be some interest from incarcerated individuals housed in the Woodbourne CF SHU in attending programming. The Justice Center recommends that the Program Management Team (PMT), or counselors responsible for providing programming in the Woodbourne CF SHU, complete a review of their recent program schedules and attendance records. In addition to this review, it is recommended that program counselors or Offender Rehabilitation Counselors (ORCs) solicit feedback from individuals housed in SHU to determine what types of programs could result in increased attendance and if possible, attempt to implement some of the suggested program topics. Refreshing and implementing new programming content based on incarcerated individuals’ personal feedback could result in an increase in program attendance.

Additionally, across facilities, individuals have expressed a lack of interest in attending out-of-cell programming due to their attendance not resulting in time cuts or earned incentives. The Justice Center recommends that DOCCS Central Office consider expanding on existing policies applicable to RRUs related to earning time cuts or property/privilege sanctions and whether they could be applied to individuals who consistently attend and engage in out-of-cell programming while housed in SHU.

4. **Incarcerated individuals housed in Woodbourne CF SHU receive law library services via daily Law Library officer rounds.**

   The SHU orientation manual states that individuals housed in the Woodbourne CF SHU can request law library tablets daily during the morning go-round. However, during cell-side interviews incarcerated individuals reported that they currently do not receive law library tablets. Security staff reported that individuals can request legal materials during the law library rounds.

   Request:

   According to a recent DOCCS response some facilities have begun allowing incarcerated individuals to keep their general population tablet, with restrictions, while in segregated confinement to allow access to the Law Library application.[10] Please confirm if Woodbourne CF has started this practice for individuals housed in the SHU and if yes, the protocols for the usage and what restrictions are in place. The Justice Center also requests that Woodbourne CF staff update the orientation manual to reflect the current process of how individuals housed in the SHU can access the Law Library, as the Justice Center has been informed that the law library tablets are no longer operational.

Special Populations:

5. **At the time of the Justice Center's visit, there was no one under the age of 21, over the age of 55, pregnant or with any disability in the SHU. There was, however, two incarcerated individuals with a diagnosed mental illness on the mental health caseload in the SHU.**

   - Incarcerated individual 1, a mental health service level (MHSL) 3, is diagnosed with adjustment disorder with mixed anxiety and depressed mood, severe alcohol use disorder, severe cocaine use disorder and severe other or unspecified stimulant use disorder.[11] On July 29, 2025, the individual was a no show for their Video Teleconferencing (VTC) psychiatric callout and the provider noted that their medication would be discontinued due to the individual missing their last three mental health callouts.[12] On August 12, 2025, the individual missed another psychiatric callout. The individual attended an appointment with their psychiatric provider on August 19, 2025, and reported anxiety and withdrawal symptoms due

[10] DOCCS December 11, 2025, response to the Justice Center's November 3, 2025, Washington CF Draft Report
[11] [redacted] (DIN: [redacted]) is hereinafter referred to as **incarcerated individual 1.**
[12] May 27, 2025, June 10, 2025, and July 29, 2025.

to their psychiatric medication being discontinued. They requested to restart their medications, except for Zoloft reporting that it makes them “feel tired”. They agreed to restart Remeron for anxiety. On November 10, 2025, the individual was transferred from the Wallkill CF to the Woodbourne CF. On November 21, 2025, the individual attended a private psychiatric call out and denied mental health concerns and reported “doing well” with current medication. On November 25, 2025, the individual attended their scheduled mental health callout during which they reported no concerns and completed their Treatment Plan Review. It was noted they were working on their treatment goals in therapy sessions. On December 23, 2025, the individual was transferred to SHU after they were observed striking an incarcerated individual with a wooden broom handle and ignored direct orders from security. During their intake Mental Health Assessment on December 24, 2025, the clinician indicated that the individual presented with mild anxiety but that no psychotic symptoms were present at the time of the interview.

- Incarcerated individual 2, a MHSL 4 active screen (AS), is diagnosed with adjustment disorder with mixed anxiety and depressed mood, severe alcohol use disorder and severe cannabis use disorder.[13] On August 12, 2025, the individual was screened and admitted to services as a MHSL 3 at the Ulster Reception Center, after they transferred to DOCCS custody with active prescriptions for psychotropic medications while reporting anxiety and depression. During a psychiatric callout conducted via VTC on August 21, 2025, the individual reported experiencing “some anxiety” since their transfer but denied having other mental health symptoms or concerns. On August 22, 2025, the individual was transferred to the Wallkill CF. During a mental health callout on September 16, 2025, the individual requested to have their case closed and reported they “did not feel the need for mental health treatment at this time” and was “fine without medication”. The individual was then designated as a MHSL 6 and terminated from services. On October 28, 2026, the individual was found in possession of a green leafy substance in a tobacco can. The 2.2 grams of substance was sent for testing and determined on December 5, 2025, to be marijuana. A hearing was completed on December 15, 2025, where the individual was found guilty of drug possession and smuggling. On December 26, 2025, the individual was transferred to Woodbourne CF SHU, and an intake Mental Health Assessment was completed on the same day. Mental health staff indicated on the assessment that they had received an immediate and regular referral due to the individual “thinking people are out to get him” and being afraid to be on their current unit. The individual reported anxiety, depressive symptoms and

[13] [redacted] (DIN: [redacted]) is hereinafter referred to as **incarcerated individual 2.**

expressed wanting to resume services and medication. They were placed on active screen status and designated as a MHSL 4AS.

Recommendation and Request:

Segregated confinement poses serious risks to a person's mental health and people with ongoing mental health needs should be provided with access to ongoing therapeutic programming instead of placement in solitary confinement for any length of time.

Please provide the Justice Center with an update on incarcerated individuals 1 and 2. This update should include the individuals' current MHSL, housing status, confinement sanctions, any additional misbehavior reports or tickets they received, and the number of times the individuals were transferred to RCTP.

Length of time spent in segregated confinement:

6. **On the day of the Justice Center's site visit, one individual had been in the SHU for fourteen days.**

At the time of the Justice Center's visit, the nine individuals in the SHU sample spent an average of 7 days in segregated confinement. The lowest amount of time spent in SHU was 1 day and the highest number of days was 14.

Incarcerated individual 3, a MHSL 6, was transferred to the Woodbourne CF SHU on December 12, 2025, after engaging in a physical assault on another individual in a stairwell. According to the records supplied to the Justice Center, the incarcerated individual 3 was admitted to the Otisville CF Infirmary on December 16, 2025, and was released and returned to the Woodbourne CF SHU on December 19, 2025.[14] On the day of the site visit, the individual would have been in the SHU for fourteen days.

Request:

Please provide the Justice Center with the transfer and SHU release dates for all nine incarcerated individuals that were in the Woodbourne CF SHU at the time of our site visit, as well as their current housing placement.[15]

[14] [redacted] (DIN: [redacted]) is hereinafter referred to as **incarcerated individual 3.**

[15] [redacted] (DIN: [redacted]), [redacted] (DIN: [redacted]), [redacted] (DIN: [redacted]), [redacted] (DIN: [redacted]), [redacted] (DIN: [redacted]), [redacted] (DIN: [redacted]), [redacted] (DIN: [redacted]), [redacted] (DIN: [redacted]), and [redacted] (DIN: [redacted])

Hearings and procedures:

7. **According to the documentation provided to the Justice Center, 14 Woodbourne Correctional Facility staff were up to date on the Tier III Hearing Officer Training.**

8. **Two incarcerated individuals requested tier assistance during their disciplinary hearings.**

   Per disciplinary hearing packets, two incarcerated individuals housed at Woodbourne CF requested and received Tier Assistance during their most recent Tier 3 disciplinary hearings.[16] One of the individuals initially attempted to obtain assistance from the Legal Aid Society, though it appears they could not secure representation, and instead received Tier Assistance.

   Incarcerated individual 4 received a Tier 3 ticket at Wallkill CF on December 16, 2025, for violent conduct, creating a disturbance and refusing a direct order after they were observed violently banging their head against their cell door, yelling, spitting, attempting to push the cell door open and reaching out of their cell to grab at officers. .[17] Their hearing began on December 22, 2025, and concluded on December 29, 2025. The Tier Assistance Form (#4932B Side A) included in their Hearing Packet indicated that the individual would be requesting legal representation and a Scheduling Notice for outside representation was also provided to the individual. However, there is no indication the individual received outside legal representation as the *Hearing Record Sheet* does not have an assistant or representative listed.

   Recommendation:

   The Justice Center recommends that DOCCS encourage hearing officers across all facilities to document clearly within the disciplinary hearing packet when incarcerated individuals request Tier Assistance or Representation, as well as the reasons why they may not receive it.

[16] [redacted] (DIN: [redacted]) and [redacted] (DIN: [redacted]) received Tier Assistance per Hearing Disposition packets.
[17] [redacted] (DIN: [redacted]) is hereinafter referred to as **incarcerated individual 4**.

9. **A review of Tier Hearing materials for the incarcerated individuals on the Justice Center's sample at Woodbourne CF determined that all were appropriate for criteria justifying Tier 3 confinement.**

All incarcerated individuals committed violation of rules that permit a penalty of segregated confinement, such as assaulting another incarcerated individual with a weapon, punching another incarcerated individual in the face and body, smuggling a cell phone in the facility, being in possession of and concealing a shank-type weapon, being in possession of and smuggling drugs into the facility, attempting to grab and spit on security staff, as well as repeatedly threatening harm to staff and facility K9 stating, "I will fuck you and your dog up".

Assessments, rehabilitation plans and discharge procedures

10. **All individuals on the Justice Center's sample had a SHU/RRU/Special Population Diversion Mental Health Interview completed within one business day.**[18]

A review of the Mental Health Interviews completed for individuals housed in the Woodbourne CF SHU showed mental health staff completed all interviews within the one business day timeline. Out of the fourteen interviews completed at Woodbourne CF, two of them were completed privately.[19] Clinicians indicated that individuals refused private interviews citing two reasons for the refusals, "Patient decline private office" or "Declined need".

11. **Two incarcerated individuals did not have their DOCCS Suicide Prevention Screening Guidelines #3152 completed per DOCCS Directive #4101.**

- Incarcerated individual 6, a MHSL 6, had a Suicide Prevention Screening Guidelines form completed upon their December 28, 2025, admission to the SHU.[20] Security staff documented 'No' to questions 1 through 4, however questions 5 through 10 were left blank.[21] Staff indicated that no mental health referral was needed, even though the form was not completed in its entirety.

[18] The Justice Center received completed Mental Health Interviews for the following individuals: [redacted] (DIN [redacted]), [redacted] (DIN [redacted]), [redacted] (DIN [redacted]), [redacted] (DIN [redacted]), [redacted] (DIN [redacted]), [redacted] (DIN [redacted]), [redacted] (DIN [redacted]), [redacted] (DIN [redacted]), [redacted] (DIN [redacted]), [redacted] (DIN [redacted]).

[19] All interviews were noted to occur between December 15, 2025, and December 29, 2025.

[20] [redacted] (DIN: [redacted]) is hereinafter referred to as **incarcerated individual 6**.

[21] Question 5: I/I shows signs of depression (e.g. crying, withdrawn); Question 6: I/I appears anxious, scared or suspicious; Question 7: I/I appears excessively irritable, angry or hyperactive; Question 8: I/I appears to have poor hygiene; Question 9: I/I appears confused, not following direction or responding appropriately (If YES, please refer the I/I to DOCCS Medical immediately. I/I must be seen by Medical prior to Mental Health); and Question 10: I/I

- Incarcerated individual 3, a MHSL 6, had a December 12, 2025, Suicide Prevention Screening Guidelines Form, indicating their transfer to the SHU. However, there is an extension request in the individual's Hearing Packet stating the individual was sent to the Otisville CF Infirmary on December 16, 2025, and the hearing was granted to be completed within ten days of their return.[22] The Justice Center did not receive an updated Suicide Prevention Screening Guidelines Form for this individual's readmission to the SHU.

Recommendation and Request:

The Suicide Prevention Screening Guidelines Form #3152 is an important tool used to effectively monitor all incarcerated individuals for the potential for self-harm or suicide attempts and preserve the safety of these individuals.[23] Several of the unanswered questions on incarcerated individual 4's form, if answered yes, would have required an immediate telephone mental health referral. Further, these questions provide mental health staff with insight into the individual's current mental health status before their initial Mental Health Interview.

The Justice Center recommends that DOCCS remind staff to ensure all documentation is completed accurately and that the SHU Security Supervisor conducts regular quality assurance checks to ensure all forms are thoroughly completed.

Please also forward incarcerated individual 3's Suicide Prevention Screening Guidelines Form that was completed upon their return. If this form was not re-completed, the Justice recommends that staff be retrained and reminded that per DOCCS Directive #4101 this form is to be administered upon readmission to SHU.

A six-month review of DOCCS and OMH records often includes records of treatment that an incarcerated individual received at another correctional facility before being transferred to the correctional facility reviewed. The findings below do not pertain to the Woodbourne CF:

appears to be under the influence of alcohol or drugs (If YES, please refer the I/I to DOCCS Medical immediately. I/I must be seen by Medical prior to Mental Health).

[22] Per Hearing Packet for incident dated December 12, 2025.

[23] DOCCS Directive #4101 Suicide Prevention states that Form #3152 is to be administer upon admission to SHU, and each subsequent admission to a SHU will require the completion of a new Form #3152.

12. Incarcerated individual 1 was not seen according to CNYPC CBO Policies #1.4 and #5.1 at the Wallkill CF. [24]

Incarcerated individual 1, a MHSL 3, missed several mental health callouts while housed at the Wallkill CF. Progress notes completed on July 15, 2025, August 21, 2025, and October 28, 2025, detail that the individual was a no-show for each scheduled callout. All notes were identical with the provider documenting, "The Pt was a no show to the scheduled callout. The officer called the housing unit, and he was unable to be located. He will be rescheduled." The individual was not seen by a clinician until November 25, 2025, following their transfer to the Woodbourne CF.

Recommendation:

Per CNYPC CBO Policy #5.1 Primary Therapist Progress Notes for incarcerated individuals that are MHSL 2 (non-S designated) and MHSL 3 are expected to be completed, at minimum, every two months.[25] Per OMH Policy #1.4 when an incarcerated patient misses a mental health callout for any reason, the callout is to be rescheduled within two weeks or sooner if clinically indicated. Should the individual miss the rescheduled mental health callout, a clinician should conduct a "face-to-face" visit with the individual within three business days of the missed rescheduled callout. The Justice Center recommends that the Wallkill CF OMH Unit Chief retrain and remind clinical staff of the importance of completing mental health callouts according to policy.

Review conducted by: Doniesha Marshall
Doniesha Marshall, Facility Review Specialist

[24] CNYPC CBO Policy #1.4, Cancelled/Refused/Missed Callouts
[25] CNYPC CBO Policy #5.1, Progress Notes

NEW YORK STATE | Office of Mental Health

KATHY HOCHUL
Governor

ANN MARIE T. SULLIVAN, M.D.
Commissioner

August 11, 2026

Jody Signoracci
Deputy Director of Outreach, Prevention and Support
Justice Center for the Protection of People with Special Needs
161 Delaware Avenue
Delmar, New York 12054

Dear Ms. Signoracci:

We received your letter dated 7/3/26, in response to the Justice Center's 12/29/25 site visit of the Woodbourne Correctional Facility (CF) Special Housing Unit (SHU) to review the quality of mental health care provided to incarcerated individuals and determine compliance with the Humane Alternatives to Long-Term Solitary Confinement (HALT) legislation, the Office of Mental Health's (OMH) policies, and the Department of Corrections and Community Supervision's (DOCCS) directives.

OMH responses were not requested or required for the recommendations associated with Findings #1-4 and 6-12. Below are OMH's responses to the pertinent findings.

Recommendation and Request for Finding #5:
"…Please provide the Justice Center with an update regarding incarcerated individuals 1 and 2. This update should include the individuals' current MHSL [Mental Health Service Level], housing status, confinement sanctions, any additional misbehavior reports or tickets they received, and the number of times the individuals were transferred to RCTP [Residential Crisis Treatment Program]."

OMH Response:
OMH continues to work with DOCCS to ensure all incarcerated individuals on the mental health caseload are appropriately housed not only in accordance with their diagnoses and MHSL, but also in accordance with their assessed treatment needs. Pursuant to policy, OMH offers callouts to individuals who remain in SHU for 15 days or less. If needed, OMH offers additional callouts beyond those required by policy. All individuals, regardless of caseload status, are also assessed cell-side during regular rounds.

Incarcerated individual 1 remains a MHSL 3. He has resided in the Fishkill CF General Population (GP) since 5/21/26. He was briefly placed in RCTP from 5/21/26-5/22/26 after triggering the DOCCS Suicide Prevention Screening form for reporting that he attempted to harm himself several years ago. He reported he was presently doing well and was future oriented towards seeing his family. He has not required further RCTP admissions.

Incarcerated individual 2 was briefly admitted to the caseload as a MHSL 3 from 1/14/26-4/2/26. He agreed with being discharged from the caseload given his stability and the absence of mental

health symptoms or needs. He has resided in the Mohawk CF GP since 2/27/26. He has not required RCTP admission during his incarceration.

OMH defers to DOCCS regarding information on any additional misbehavior reports these individuals may have received.

Recommendation for Finding #13:
"…The Justice Center recommends that the Wallkill CF OMH Unit Chief retrain and remind clinical staff of the importance of completing mental health callouts according to policy."

OMH Response:
The Wallkill CF Unit Chief reviewed the cancelled/missed/refused policy with the pertinent clinician.

Sincerely,

Li-Wen Lee, M.D.
Associate Commissioner
Division of Forensic Services

cc: Danielle Dill, Psy.D., Executive Director, CNYPC
William Vertoske, Deputy Director, Corrections Based Operations, CNYPC
File

NEW YORK STATE | Department of Corrections and Community Supervision

KATHY HOCHUL
Governor

DANIEL F. MARTUSCELLO III
Commissioner

August 3, 2026

Jody Signoracci
Deputy Director, Office of Outreach, Prevention & Support
NYS Justice Center for the Protection of People with Special Needs
161 Delaware Avenue
Delmar, NY 12054

Woodbourne Correctional Facility
Humane Alternatives to Long-Term Solitary Confinement (HALT)
Draft Compliance and Quality of Care Review
JC#: 77010182875

Dear Deputy Director Signoracci:

This is in response to the New York State Justice Center's visit at the Woodbourne Correctional Facility on December 29, 2025, to review the quality of corrections-based mental health programs, treatment, and conditions of confinement for incarcerated individuals placed in Special Housing Unit (SHU) in that facility in accordance with the HALT Legislation, OMH policies, and DOCCS Directives.

1. Recommendation and Request:

The Justice Center continues to recommend that DOCCS staff provide quality programs consistent with those in general population and provide incentives to encourage incarcerated individuals to attend and engage in programming. While it is understood that individuals are not housed in the SHU for an extended period, DOCCS and OMH staff should attempt to debrief with them about their disciplinary sanction while in confinement and assist in preparing them for the transition to a Residential Rehabilitation Unit (RRU). Additionally, though the Justice Center commends Woodbourne Correctional Facility staff for offering individuals additional time to access static tablets, it is recommended that tablets not be offered at the same time as out-of-cell programming as it could discourage attendance.

The Justice Center requests the following documentation: Woodbourne Correctional Facility Operations Manual, current programming schedule, February 2026 attendance records for out-of-cell programming including congregate recreation, as well as the Activity and Sign in Logbooks from December 15, 2025, to December 29, 2025.

Response:

At Woodbourne Correctional Facility, DOCCS program staff in SHU offer a variety of therapeutic, holistic, and psycho-educational programming that includes social skills and coping skills. Incarcerated individuals who are placed in SHU are there for a short duration, not to exceed fifteen (15) days, as per the HALT Legislation. Therefore, programming offered in general population such as the Earned Eligibility Program (EEP) that includes Transitional Services, ART, IDDT are not appropriate for SHU as they require a longer timeframe for completion. Offering Earned Eligibility Programming in SHU would also be rewarding negative behaviors.

All the incentives provided in SHU are standardized and approved by Central Office to provide consistency in all therapeutic programs statewide.

In SHU, both DOCCS security and civilian staff continue to engage all incarcerated individuals in attending out-of-cell therapeutic programming. OMH is not involved in SHU programming at Woodbourne Correctional Facility.

At Woodbourne Correctional Facility, tablets are not offered at the same time as out-of-cell programming. However, to provide the incarcerated individuals with some structure, psycho-educational material and connectedness, they are given access to their tablets if they decline to attend program.

Out-of-cell programming is offered daily from 7:45 am to 10:45 am and from 11:45 am to 2:45 pm. We have attached as requested the Woodbourne Correctional Facility Operations Manual, the out-of-cell programming attendance records for February 2026, including congregate recreation, as well as the Activity and Sign in Logbooks from December 15, 2025, to December 29, 2025.

2. The Justice Center staff completed private interviews with four individuals.

3. Recommendation:

Based on responses in private interviews and surveys there appears to be some interest from incarcerated individuals housed in the Woodbourne Correctional Facility SHU in attending programming. The Justice Center recommends that the Program Management Team (PMT), or counselors responsible for providing programming in the Woodbourne Correctional Facility SHU, complete a review of their recent program schedules and attendance records. In addition to this review, it is recommended that program counselors or Offender Rehabilitation Counselors (ORCs) solicit feedback from individuals housed in SHU to determine what types of programs could result in increased attendance and if possible, attempt to implement some of the suggested program topics. Refreshing and implementing new programming content based on incarcerated individuals' personal feedback could result in an increase in program attendance.

Additionally, across facilities, individuals have expressed a lack of interest in attending out-of-cell programming due to their attendance not resulting in time cuts or earned incentives. The Justice Center recommends that DOCCS Central Office consider expanding on existing policies applicable to RRUs related to earning time cuts or property/privilege sanctions and whether they could be applied to individuals who consistently attend and engage in out-of-cell programming while housed in SHU.

Response:

At Woodbourne Correctional Facility, our staff continues to provide programming that includes a range of topics from current events to self-regulation techniques and coping skills. Incarcerated individuals housed in SHU are there for a limited time and the population changes frequently depending on admissions and transfers. Changing the curriculum daily based on incarcerated individuals' personal feedback does not provide program consistency. As an alternative, the PMT has discussed having ORCs offer three (3) of the most popular topics and have incarcerated individuals choose what they would like to discuss when they attend program. This would provide them with options while maintaining the integrity and consistency of the program. These topics can be rotated occasionally.

4. Request:

According to a recent DOCCS response some facilities have begun allowing incarcerated individuals to keep their general population tablet, with restrictions, while in segregated confinement to allow access to the Law Library application. Please confirm if Woodbourne Correctional Facility has started this practice for individuals

housed in the SHU and if yes, the protocols for the usage and what restrictions are in place. The Justice Center also requests that Woodbourne Correctional Facility staff update the orientation manual to reflect the current process of how individuals housed in the SHU can access the law library, as the Justice Center has been informed that the law library tablets are no longer operational.

Response:

In regard to your inquiry about incarcerated individuals using their personal tablets in the disciplinary housing units, this is still being piloted in a few facilities but has not yet been implemented throughout all DOCCS facilities. Woodbourne Correctional Facility has not yet been identified to transition to personal tablets.

In the meantime, we are continuing to provide Law Library services in accordance with Directives #4933, "Special Housing Units" and #4933D, "Residential Rehabilitation Units". Incarcerated individuals are able to make requests through the Law Library Officer during the AM rounds or in writing. Our staff at Woodbourne Correctional Facility is working on updating the Orientation Manual to replace "Law Library Tablet" with "Law Library Services".

5. Recommendation and Request:

Segregated confinement poses serious risks to a person's mental health and people with ongoing mental health needs should be provided with access to ongoing therapeutic programming instead of placement in solitary confinement for any length of time.

Please provide the Justice Center with an update on incarcerated individuals 1 and 2. This update should include the individuals' current MHSL, housing status, confinement sanctions, any additional misbehavior reports or tickets they received, and the number of times the individuals were transferred to RCTP.

Response:

DOCCS continues to divert every individual that is considered special population to a facility with access to therapeutic programming in accordance with HALT Legislation. Not all individuals on the OMH caseload meet the definition of special population, therefore, can be placed in the SHU for a timeframe not to exceed 15 days as per the HALT legislation.

Furthermore, Senate Bill S4269 was introduced to expand the definition of special populations to include everyone with a mental health diagnosis on the OMH caseload; however, this bill was vetoed by the Governor.

Incarcerated individual 1 ([redacted]) is currently housed in general population at Fishkill Correctional Facility with no current confinement sanctions. They are assigned a MHSL 3 and since the Justice Center's visit on December 29, 2025, they have not received any additional misbehavior reports. They did not receive any additional confinement sanctions and were not placed in RCTP.

Incarcerated individual 2 ([redacted]) is currently housed in general population at Mohawk Correctional Facility with no current confinement sanctions. They are assigned a MHSL 6 and since the Justice Center's visit on December 29, 2025, they have received one (1) additional Tier III and three (3) additional Tier II misbehavior reports. They did not receive any additional confinement sanctions and were not placed in RCTP.

6. Request and Recommendation:

Please provide the Justice Center with the transfer and SHU release dates for all nine (9) incarcerated individuals that were in the Woodbourne Correctional Facility SHU at the time of our site visit, as well as their current housing placement.

Response:

1. [redacted] ([redacted]) was transferred to Gouverneur Correctional Facility RRU for programming purposes on January 9, 2026. Their confinement sanction expired on March 26, 2026, and they are currently housed in general population at Riverview Correctional Facility.

2. [redacted] ([redacted]) was transferred to Upstate Correctional Facility RRU for programming purposes on January 6, 2026. Their confinement sanction expired on March 20, 2026, and they are currently housed in general population at Fishkill Correctional Facility.

3. [redacted] ([redacted]) was transferred to Gouverneur Correctional Facility RRU for programming purposes on January 6, 2026. Their confinement sanction expired on February 18, 2026, and they are currently housed in general population at Groveland Correctional Facility.

4. [redacted] ([redacted]) was transferred to Upstate Correctional Facility RRU for programming purposes on January 6, 2026. Their confinement sanction expired on January 22, 2026, and they are currently housed in general population at Woodbourne Correctional Facility.

5. [redacted] ([redacted]) was transferred to Cayuga Correctional Facility RRU for programming purposes on January 13, 2026. Their confinement sanction expired on February 5, 2026, and they are currently housed in general population at Mohawk Correctional Facility.

6. [redacted] ([redacted]) was transferred to Collins Correctional Facility RRU for programming purposes on January 9, 2026. Their confinement sanction expired on February 23, 2026, and they are currently housed in general population at Mohawk Correctional Facility.

7. [redacted] ([redacted]) was transferred to Fishkill Correctional Facility RRU for programming purposes on January 6, 2026. Their confinement sanction expired on February 1, 2026, and they are currently housed in general population at Fishkill Correctional Facility.

8. [redacted] ([redacted]) was transferred to Upstate Correctional Facility RRU for programming purposes on January 9, 2026. Their confinement sanction expired on April 17, 2026, and they are currently housed in general population at Riverview Correctional Facility.

9. [redacted] ([redacted]) was transferred to Cayuga Correctional Facility RRU for programming purposes on January 6, 2026. Their confinement sanction expired on March 5, 2026, and they were released to the community on May 13, 2026, from Mohawk Correctional Facility.

7. Request:

Please provide documentation that shows which Woodbourne Correctional Facility staff completed the Tier III Hearing Officer Training and when it was completed.

Response:

We have attached for your review the list of staff who completed the Tier III Hearing Officer Training at Woodbourne Correctional Facility.

8. Request:

Please forward the Justice Center the Hearing Record Sheet for incarcerated individual 4, corresponding to the incident dated December 16, 2025, at Wallkill Correctional Facility.

Response:

We have attached for your review the disciplinary hearing packet for incarcerated individual 4, corresponding to the incident dated December 16, 2025, at Wallkill Correctional Facility.

9. Request:

Please forward the Misbehavior Report and Hearing Packet related to the incident this individual was involved in on September 20, 2025.

Response:

We have attached for your review the two (2) disciplinary hearing packets for incarcerated individual 5 ([redacted]) dated December 24, 2025, and December 25, 2025, for charges including Drug Possession and Smuggling for your review.

10. A review of Tier Hearing materials for the incarcerated individuals on the Justice Center's sample at Woodbourne Correctional Facility determined that all were appropriate for criteria justifying Tier III confinement.

11. All individuals on the Justice Center's sample had a SHU/RRU/Special Population Diversion Mental Health Interview completed within one (1) business day.

12. Recommendation and Request:

The Suicide Prevention Screening Guidelines Form #3152 is an important tool used to effectively monitor all incarcerated individuals for the potential for self-harm or suicide attempts and preserve the safety of these individuals. Several of the unanswered questions on incarcerated individual 4's form, if answered yes, would have required an immediate telephone mental health referral. Further, these questions provide mental health staff with insight into the individual's current mental health status before their initial Mental Health Interview.

The Justice Center recommends that DOCCS remind staff to ensure all documentation is completed accurately and that the SHU Security Supervisor conducts regular quality assurance checks to ensure all forms are thoroughly completed.

Please also forward incarcerated individual 3's Suicide Prevention Screening Guidelines Form that was completed upon their return. If this form was not re-completed, the Justice Center recommends that staff be retrained and reminded that per DOCCS Directive #4101, "Incarcerated Individual Suicide Prevention". This form is to be administered upon readmission to SHU.

Response:

Our administration continues to emphasize the importance of the Suicide Prevention Screening Guidelines Form #3152 to all security supervisors. The executive team at Woodbourne Correctional Facility have addressed this with the security supervisors to ensure that all applicable documentation in SHU is completed accurately and entirely, and that a mental health referral is done when indicated. Security staff and supervisors assigned to SHU

have been retrained on the appropriate use of the screening Form #3152 and making sure a new one is administered for each SHU admission and re-admission.

13. Recommendation:

Per CNYPC CBO Policy #5.1 Primary Therapist Progress Notes for incarcerated individuals that are MHSL 2 (non-S designated) and MHSL 3 are expected to be completed, at minimum, every two months. Per OMH Policy #1.4 when an incarcerated patient misses a mental health callout for any reason, the callout is to be rescheduled within two weeks or sooner if clinically indicated. Should the individual miss the rescheduled mental health callout, a clinician should conduct a "face-to-face" visit with the individual within three business days of the missed rescheduled callout. The Justice Center recommends that the Wallkill Correctional Facility OMH Unit Chief retrain and remind clinical staff of the importance of completing mental health callouts according to policy.

Response:

DOCCS will defer to OMH on this request.

Thank you for the opportunity to comment on your report. I look forward to continuing to work productively with the Justice Center to improve the services for our population.

Sincerely,

James Donahue
Associate Commissioner

cc: Betsy Smith, Superintendent - Woodbourne Correctional Facility
Doniesha Marshall, Facility Review Specialist, NYS Justice Center