Good evening Senator Osten, Representative Walker, and members of the Appropriations Committee. I would like to take this opportunity to thank the members of the committee for having this forum for us to share with you our feelings and concerns about the upcoming budget decisions for the Connecticut Department of Corrections.

My name is Julie Wright. I am a Licensed Supervising Psychologist for the Connecticut Department of Corrections. I began in the correctional system approximately 12 years ago- initially completing my pre-doctoral internship and postdoctoral fellowship before obtaining a psychologist position. In my early training, I had the opportunity to provide care at seven different correctional facilities and as a supervisor, I provided clinical oversite for the STARTNOW Program statewide.

Currently, I work full time in the Mental Health Department at York Correctional Institution in Niantic, Connecticut. York CI is the only female correctional facility for the state and houses approximately 950 female offenders. Given that this is the State’s only female correctional facility, all populations are represented here including juvenile offenders, youthful offenders, young adults, elderly inmates, those who are un-sentenced, those carrying life sentences and everything in between. Additionally, the facility houses security levels 1-5, and specialized populations such as gang members, chronic disciplinary offenders, special needs status, administrative segregation, sexual offenders, victims of sexual assault, pregnant offenders, those with chronic and persistent psychiatric and medical conditions, offenders that carrying diagnoses of infectious diseases and those that are substance-dependent or withdrawing.

Approximately 75 percent of our population meets diagnostic criteria for a mental illness and are prescribed psychotropic medications to target symptoms. Nearly 15 percent of that population requires intensive mental health care and intervention. The National Commission of Correctional Health Care provides Standards of Care of the mental health identification and treatment of offenders in jail and prison settings. We simply do not have sufficient staffing to adequately care for the mental health population at our facility. The system has become reactive and operates as a crisis model rather than proactively seeing patients at predictable, regular intervals to provide consistent, quality care. Over the past year, we have experienced an all-time staffing low since my tenure at the facility. Nurses are being held several times per week, clinical social workers and licensed professional counselors are being mandated with greater frequency and positions are going unfilled. Maternity leaves, medical leaves, and general absences further deplete our work force. In response, a rotating coverage schedule is used as a stop-gap measure to temporarily cover essential tasks with whatever staff are available. This practice however, comes at the expense of routine care e.g. medication evaluations and
monitoring, reassessments, psychotherapy and group psychotherapy. We essentially steal from Peter to pay Paul so frequently that the system now operates in a crisis modality much of the time. Patients are often rescheduled again and again, delaying much needed care and appropriate monitoring. Inmate Requests and crises are consistently high. We are operating in a system where as staff, it feels dangerous to practice and we are consciously aware we are not able to provide the good clinical care we would like to provide to our patients as a direct result of inadequate staffing levels. Morale is at an all-time low.

I am imploring you to consider these issues when you make a final decision on Connecticut Department of Correction budget. I ask you to please restore the Connecticut Depart of Correction budget to at minimum the amount requested by the Commissioner of Department. Thank you for your time and consideration.