

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Bureau of Environmental Health
Community Sanitation Program
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March 21, 2023

Steven W. Tompkins, Sheriff
Suffolk County Sheriff's Department
20 Bradston Street
Boston, MA 02118 (electronic copy)

Re: Complaint-Based Facility Inspection – Suffolk County House of Correction, Boston

Dear Sheriff Tompkins:

In response to alleged complaints and in accordance with 105 CMR 451.408 Additional Inspectional Visits, the Department of Public Health (Department) Community Sanitation Program (CSP) conducted a complaint-based inspection of the Health Services Unit (HSU) at Suffolk County House of Correction on February 13, 2023. This letter summarizes the complaint allegations and the results of our inspection.

On January 31, 2023, February 7, 2023, and February 9, 2023, a complainant contacted the Department with the following complaints alleging unsanitary conditions in the HSU including:

1. Rodent activity;
2. Rusty beds;
3. Unsanitary floors and walls with feces and vomit;
4. Beds with no sheets;
5. Staphylococcus aureus (Staph) and a Methicillin-resistant Staphylococcus aureus (MRSA) outbreak;
6. Patients with open wounds creating a high risk for tetanus;
7. A lack of nutrient dense meals served to incarcerated individuals;
8. A lack of care beyond mental health screening;
9. Inmates being stripped naked and put into solitary confinement if they present with depression or suicidal thoughts.

The morning of the inspection, the CSP contacted Sergeant John Fallon, Environmental Health and Safety Officer (EHSO), to inform him of the need to conduct an inspection in response to the complaint allegations that fall within the regulatory authority of 105 CMR 451.000, specifically bullets 1- 5 above. CSP inspectors Amy Riordan and Kerry Wagner conducted the inspection. CSP staff were accompanied by William Sweeney, Superintendent, Rachelle Steinberg, Assistant Superintendent, Cindylou Lyons, Director of Medical Services, Bonnie Damigella, Health Service Administrator, Captain Brian Reynolds, and Sergeant John Fallon.

The first section of page two addresses the specific allegations made by the complainant. As part of the inspection, the CSP cross-referenced previously documented violations in the HSU found during the November 3, 2022, inspection. These repeated violations are marked with an asterisk. The inspection findings verified 35 violations and 5 repeat violations.

HEALTH AND SAFETY VIOLATIONS FOUND IN RESPONSE TO ALLEGATIONS:

BUILDING # 6

Health Services Medical Area

Exam Room # 1 3172

105 CMR 451.353 Interior Maintenance: Floor dirty

Inmate Bathroom # 6229

105 CMR 451.123* Maintenance: Floor dirty

105 CMR 451.123* Maintenance: Ceiling vent dusty

105 CMR 451.110(A) Hygiene Supplies at Toilet and Handwash Sink: No soap at handwash sink

105 CMR 451.123 Maintenance: Toilet dirty, covered in feces

105 CMR 451.123 Maintenance: Strong urine odor present

X-Ray Room # 6265

105 CMR 451.360 Protective Measures: Rodent droppings observed on floor

Dental Storage Closet # 6262

105 CMR 451.360 Protective Measures: Rodent droppings observed on floor

Medical Unit

Recreation Room # 6258

105 CMR 451.360 Protective Measures: Rodent droppings observed on floor

Storage Room # 6253

105 CMR 451.360 Protective Measures: Rodent droppings observed on floor

Chemical Storage Room # 6248

105 CMR 451.353 Interior Maintenance: Strong odor from dirty mop heads

Inmate Property # 6246

105 CMR 451.360 Protective Measures: Rodent droppings observed on floor

Isolation Cells (# 3 and 5)

105 CMR 451.353 Interior Maintenance: Ceiling vent dusty in cell # 3

Staff Lounge # 6236

105 CMR 451.360 Protective Measures: Rodent droppings observed on floor

Shower Area

105 CMR 451.123* Maintenance: Ceiling vent dusty in shower # 2 and 3

105 CMR 451.123* Maintenance: Walls dirty in showers # 3

105 CMR 451.123 Maintenance: Floor dirty in shower # 1

Cells

105 CMR 451.104 Beds: Bed not in good condition, bed surface rusty and dirty in cell # 1, 9, 10, 11, 13, 14, and 16

105 CMR 451.117 Toilet Fixtures: Toilet fixture dirty in cell # 9

105 CMR 451.353 Interior Maintenance: Wall dirty in cell # 11, 13, and 14

105 CMR 451.353 Interior Maintenance: Floor dirty in cell # 11 and 13

105 CMR 451.353 Interior Maintenance: Ceiling dirty in cell # 1, 9, 11, and 14

Additional health and safety violations not addressed by the complainant are listed below. Inspectors identified 29 violations and 11 repeat violations.

HEALTH AND SAFETY VIOLATIONS FOUND IN ADDITION TO ALLEGATIONS:

BUILDING # 6

Health Services Medical Area

Exam Room # 1 3172

105 CMR 451.126

105 CMR 451.353*

Hot Water: Hot water temperature recorded at 140⁰F at handwash sink

Interior Maintenance: Floor tiles damaged

Exam Room # 3 3171

105 CMR 451.130*

105 CMR 451.340

Plumbing: Plumbing not maintained in good repair, faucet loose at handwash sink

Illumination: Light not functioning properly, light out

Exam Room # 4 3133

105 CMR 451.126*

Hot Water: Hot water temperature recorded at 143⁰F at handwash sink

Office # 6267

105 CMR 451.350

Structural Maintenance: Window broken

X-Ray Room # 6265

105 CMR 451.340

Illumination: Light not functioning properly, light out

Director of Nursing Office # 6263

105 CMR 480.425(A)*

Tracking Medical or Biological Waste for Treatment: Generator did not confirm the shipment was received by the treatment facility within 30 days on an approved tracking form

Medical Unit

Hallway

105 CMR 451.353

Interior Maintenance: Floor dirty, spilled juice on floor near cell # 1

Kitchenette # 6256

Unable to Inspect - Under Construction

Isolation Cells (# 3 and 5)

105 CMR 451.130

Plumbing: Plumbing not maintained in good repair, shower head not secured to wall in cell # 3

Storage Room # 6253

105 CMR 451.353

Interior Maintenance: Wet mop stored in bucket

Staff Bathroom # 6247

105 CMR 451.130

Plumbing: Plumbing not maintained in good repair, faucet loose

Shower Area

105 CMR 451.123*

105 CMR 451.123*

105 CMR 451.123

Maintenance: Floor epoxy damaged at entrance to shower # 3

Maintenance: Door frame paint damaged in shower # 2

Maintenance: Door frame rusted in shower # 3

Staff Bathroom # 6237

105 CMR 451.126

Hot Water: Hot water temperature recorded at 141⁰F

Cells

105 CMR 451.353*	Interior Maintenance: Floor paint damaged in cell # 8, 15, 16, 18, and 19
105 CMR 451.353	Interior Maintenance: Floor paint damaged in cell # 9
105 CMR 451.103	Mattresses: Mattress damaged in cell # 1, 8, and 12
105 CMR 451.104	Beds: Bed not in good condition, not properly secured to bunk supports in cell # 1 and 14
105 CMR 451.123	Maintenance: Wall paint damaged in shower in cell # 1
105 CMR 451.330	Room Temperature: Room temperature 64 ⁰ F in cell # 1

CSP STAFF INSPECTED THE FOLLOWING 12 AREAS AND DID NOT FIND VIOLATIONS:

BUILDING # 6

Health Services Medical Area

Hallway

Exam Room # 2 3134

Exam Room # 5

File Room # 6226

Medication Room

Lab Room # 6268

Office # 6264

Dental Exam Room # 6261

Medical Unit

Isolation Handwash Sink

Office # 6254

Storage Room # 6252

Medical Waste/Biohazard Storage # 6250

OBSERVATIONS AND RECOMMENDATIONS:

1. The incarcerated individual population in the Health Services Unit was 13 at the time of inspection.
2. Bed sheets were observed in every occupied cell. The Assistant Superintendent confirmed that sheets are washed in between each occupancy of the cell.
3. There was feces observed on the toilet seat in the bathroom # 6229.
4. Vomit was not observed in any area of the HSU.
5. The Department received rodent control service report records, confirming two visits a week including the last treatment on February 10, 2023. Based on this information and the number of rodent droppings observed in the HSU, the Department recommends implementing additional clean-up procedures to ensure droppings are cleaned up and reevaluating the approach by the pest company to increase their frequency of treatment.
6. At the time of the inspection, Assistant Superintendent Steinberg confirmed incarcerated individual workers are responsible for the daily cleaning of the cells in the Medical Unit. The CSP recommends increased cleaning frequency throughout the area. Staff should train incarcerated individual workers on the expectations for the areas that need to be routinely cleaned.
7. Assistant Superintendent Steinberg confirmed that there were no cases of Staph, however, there was one confirmed case of MRSA in December that was handled by facility medical staff. The Department's Bureau of Infectious Disease and Laboratory Sciences (BIDLS), which is responsible for enforcing 105 CMR 300.000 for the reporting and surveillance of infectious diseases including MRSA, reported that there were no clusters of cases that would indicate an outbreak at this facility.

8. Allegations 6, 7, 8, and 9 do not fall under the regulatory authority of 105 CMR 451.000. The CSP will provide a copy of this letter to the complainant and explain that they can contact the DOC regarding the additional allegations.

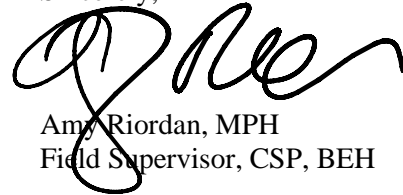
This facility does not comply with the Department's Regulations cited above. In accordance with 105 CMR 451.404, please submit a plan of correction within 10 working days of receipt of this notice. The plan must include specific corrective steps to be taken, a timetable for such steps, and the date by which correction will be achieved. The Superintendent or Administrator should sign the plan and submit it to my attention at the address listed above or e-mail me at Amy.M.Riordan@mass.gov.

To review the specific regulatory requirements please visit our website at www.mass.gov/dph/dcs and click on "Correctional Facilities" (available in both PDF and RTF formats).

Should you have any questions, please don't hesitate to contact me at the address listed above.

This inspection report is signed and certified under the pains and penalties of perjury.

Sincerely,



Amy Riordan, MPH
Field Supervisor, CSP, BEH

cc: Margret R. Cooke, Commissioner, DPH
Nalina Narain, Director, BEH
Steven Hughes, Director, CSP, BEH
Kathleen E. Walsh, Secretary, Executive Office of Health and Human Services (electronic copy)
Carol A. Mici, Commissioner, DOC (electronic copy)
Terrence Reidy, Secretary, EOPSS (electronic copy)
Timothy Gotovich, Director, Policy Development and Compliance Unit (electronic copy)
William Sweeney, Superintendent (electronic copy)
Sergeant John Fallon, EHSO/FSO (electronic copy)
Daniel J. Prendergast, Assistant Commissioner, ISD/Health Division, City of Boston (electronic copy)
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