Inmate Surveys, Part II

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, ✓ NO.

Comments: Some staff are fine but most don't do their job unless another staff is around.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Intensive management

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 35 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
So far a week

7) What **mental health treatments** are available to you when on segregation status?
None that I know of.

8) How often are you contacted by **a mental health** practitioner? 1-2 times a month
Typically, how much time do they spend with you? 2-3 mins

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Anger managment

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
~~Drug and Alcohol~~ and Anger ~~Management Classes~~
None.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Drug and Alcohol and Angermanagement

Please provide any additional comments below:

Additional Comments regarding segregation status:

Being in Segregation for too long at a time for little reasons makes you feel like an animal. Having absolutly nothing to do for weeks at a time makes you think too much about why you're in here and ~~they~~ when you get out, If you get out. And if you have a long sentence segregation makes you not care anymore about doing good and staying out of trouble. Segregation changes you a lot.

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: [redacted] _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: Inmates should be allowed to use the phone on any Segregation Level. (personal calls) And buy Five dollars worth of canteen foo

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
DS and orientation level 1

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 12 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
14 days

7) What **mental health treatments** are available to you when on segregation status?
practitioner.

8) How often are you contacted by **a mental health** practitioner? 2
Typically, how much time do they spend with you? 10 to 15 mins.

9) What **programs** are available to you in segregation status?
Don't know.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? ART.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
nothing. It's fine the way it is.

[redacted] [redacted]

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

none.

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: STAFF, all STAFF get Favorites and if your not thier favorite they half ass every thing with you or look at you different, ~~[illegible]~~

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
A.C. 3-A.

4) How many times have you been on segregation status? 5 or 6 times

5) Overall, approximately how long have you been on segregation status? 4 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
about 50 days before that nearly 3 and a half years.

7) What **mental health treatments** are available to you when on segregation status?
a Quick ~~[illegible]~~ minute talk with a consulor
such as (How are you. okay just needed to check on you.

8) How often are you contacted by **a mental health** practitioner? 3 times a month
Typically, how much time do they spend with you? 5 minutes max

9) What **programs** are available to you in segregation status?
Nothing

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Drug treatment, anger managment
all the above

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
my encounter with other people, verbally and phisically.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

to Society. Food, money, and a place to stay and a Job.

Please provide any additional comments below:

Additional Comments regarding segregation status:

I been in segregation since I was 15 years old. I don't think you all understand the toll that has on someone, the hole doesn't change a man's behavior. it won't prevent a man from making bad choices it'll maybe change 5% of the population - but the other 95% it will make them think so much they'll go insane. they'll be like okay I did this act and I got caught okay now lets find a way not to get caught it gives us time to think about idea's and to out smart. it makes us dummer but in a way smarter what would you do in a Room 24/7 little portions of Food and ripped up books and the same 11 channel's on television if you own a television 3 showers a week and maybe earn 4 showers a week for good behavior up to 6 months no visits maybe once a week we need human contact and programs this gonna sound crazy but start a boot camp beganing tough and the end rewarding, 45 years old or older or have some health issue doing hard labor I mean turn it in to something we do not wanna come back too.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, ____ NO.

   Comments: None

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
   D.S.

4) How many times have you been on segregation status? 10 times

5) Overall, approximately how long have you been on segregation status? Week

6) During this stay, or your most recent stay in segregation status, how long were you held?
   Week

7) What **mental health treatments** are available to you when on segregation status?

8) How often are you contacted by **a mental health** practitioner? 1 a week
   Typically, how much time do they spend with you? 3 to 5 min

9) What **programs** are available to you in segregation status?
   School

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
   none

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

none

Please provide any additional comments below:

Additional Comments regarding segregation status:

none

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: No because whenever we get put on Lock down it seems like they just blow us off or Ignore us.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
IS management

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 3 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
3 days

7) What **mental health treatments** are available to you when on segregation status?
NONE

8) How often are you contacted by **a mental health** practitioner? Once a week
Typically, how much time do they spend with you? 10 ; 15 minutes

9) What **programs** are available to you in segregation status?
NONE

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Anger management

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Anger management

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anger management

Please provide any additional comments below:

Additional Comments regarding segregation status: I think If there are Programs that we need for Parole they Shouldnt take them away when we go to Seg because You might be in Seg for Self defense or other things like that.

OPTIONAL: Name _____ INMATE NUMBER [redacted]

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: N/A

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Immediet seg

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 14 days 2 weeks

6) During this stay, or your most recent stay in segregation status, how long were you held?
7

7) What **mental health treatments** are available to you when on segregation status?
N/A

8) How often are you contacted by **a mental health** practitioner? 1 a week
Typically, how much time do they spend with you? 10 MIN

9) What **programs** are available to you in segregation status?
N/A

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? ART treatment

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
ART

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

_____

_____

Please provide any additional comments below:

Additional Comments regarding segregation status:

_____

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: The little they do is fair I guess.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Immediate Segregation / Disciplinary Segregation

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 10 days all together

6) During this stay, or your most recent stay in segregation status, how long were you held?
5 days last stay, currently been 3 days

7) What **mental health treatments** are available to you when on segregation status?
I have never been seen by a mental health professional while in segregation.

8) How often are you contacted by **a mental health** practitioner? N/A
Typically, how much time do they spend with you? N/A

9) What **programs** are available to you in segregation status?
N/A

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I cannot attend ART classes or college while in segregation.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
The therapist and safety cordinators should be attempting to solve the problems causing the violence within the institutions.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

The people who get into altercations should some how have a sit down to discuss why there is a problem. And when inmates have altercations with staff there should also be some type of sit down to attempt to resolve conflict and differences.

Please provide any additional comments below:

Additional Comments regarding segregation status:

There needs to be some type of programming and work assigned while in segregation instead of just sitting and dwelling on what happened.

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_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: I STRONGLY DISAGREE BECAUSE INDIVISUALS WITH SERIOUS NEEDS AND NORMAL NEEDS ARE ALL TREATED THE SAME.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
TEMPORARY SEGREGATION FOR A PHYSICAL ALTERCATION.

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 26 DAYS ALL TOGETHER

6) During this stay, or your most recent stay in segregation status, how long were you held?
15 DAYS

7) What **mental health treatments** are available to you when on segregation status?
NONE EXACTLY. DURING MY LAST 2 STAYS IN SEGREGATION I SAW A THERAPIST ONE TIME.

8) How often are you contacted by **a mental health** practitioner? ONCE A MONTH
Typically, how much time do they spend with you? 1 HOUR

9) What **programs** are available to you in segregation status?
TIME IN SEG GATE BY YOURSELF FOR ONE HOUR AND 3 15 MINUTE SHOWERS EVERY WEEK.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? 2 HOURS OF RECREATION YARD EVERY DAY AND SOME RELIGIOUS PROGRAMS CAN BE ATTENDED WHILE YARD TIME IS AVALABLE IF ROSTERED/SIGNED UP.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
A TUTOR TO HELP WITH NOT ONLY MENTAL HEALTH BUT ALSO SOMEONE TO ASIST IN THE EDUCATIONAL OUTCOME OF THE INMATE OR PERSON INCARCERATED. THEY SHOULD ALSO BE A SUPPORT MENTORING PROGRAM WHO CAN ESSCORT THE TO ACTIVITIES SUCH AS BASKETBALL OR OTHER ACTIVE ACTIVITIES SO THAT THE PERSON DOSENT MENTALY BRAKE DOWN.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison? N/A

EXPLAINED ON OTHERSIDE.

Please provide any additional comments below:

Additional Comments regarding segregation status: I THINK AS A PERSON, THAT PRISON SHOULDNT BE SO OBSTICLED. SEGREGATION IN GENERAL HAS RUINED MANY LIVES AS IT IS. IT IS A OUTRAGE TO SEE INDIVISUALS GO TO SEGREGATION A CONFUSED NON-UNDERSTOOD PERSON, AND COME OUT WITH MENTAL ILLNESSES CAUSED BY LONLINESS AND DEPRESSION. IT CAUSES CRIME RATE TO INCREASE WHEN SOMEONE GOES TO SEGREGATION WITH A BAD PAST BUT SEES NO LIGHT IN THE HOLE, OR FUTURE. MORE CARE NEEDS TO BE SHOWN TO THESE INDIVISUALS IN SEGREGATION FOR THE MORAL RIGHT OF OUR SOCIETY BECAUSE IM ONLY SEVENTEEN AND MY WHOLE LIFE GROWING UP ALL IVE SEEN IS THE SAME TREATMENT TAUGHT TO OUR YOUNGER SOCIETY IN ALL TYPES OF FACILITIES SEGREGATION IS THE SAME AND NO ONE SHOULD BE USED TO BEING PUT IN A ROOM AND FEEL FORGOTEN.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

   Comments: None

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
   DS

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 21 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
   7 days

7) What **mental health treatments** are available to you when on segregation status?
   you can talk to your mental health consulter

8) How often are you contacted by **a mental health** practitioner? Once A month
   Typically, how much time do they spend with you? 15-20 mins

9) What **programs** are available to you in segregation status?
   wreath

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Anger management

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
   Counseling

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

None

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: Because usually the Phycoligolist asks use ~~the~~ every day how we are doing

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Custody level Medium, Tenart population,

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 81 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
7 days

7) What **mental health treatments** are available to you when on segregation status?
To talk to UCM, anyone working Phycoligist

8) How often are you contacted by **a mental health** practitioner? 2 times month
Typically, how much time do they spend with you? 1 hour

9) What **programs** are available to you in segregation status?
Cleaning room, recration, Cleaning unit,

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? SAU,

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
relizing it's ~~[illegible]~~ effecting parole, or damming

[redacted] [redacted]

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

when you would have a better level program starting off 1 hour a day to Genpl population

Please provide any additional comments below:

Additional Comments regarding segregation status:

More time outside, one shower a day and on weekends. Have more opportunities to come out your room

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
2D

4) How many times have you been on segregation status? 2 times

5) Overall, approximately how long have you been on segregation status? 26 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
21 days

7) What **mental health treatments** are available to you when on segregation status?
Im not sure I think just being able to talk to a ~~ton~~ psychatrist.

8) How often are you contacted by **a mental health** practitioner? not sure
Typically, how much time do they spend with you? Not sure

9) What **programs** are available to you in segregation status?
Not Sure

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? not sure

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Dont feel I need any

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I dont feel that I need any

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: We get in trouble for some very stupid things here if this is Prison lets make it equal to the Older Prisons

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
General Population

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? [illegible]

6) During this stay, or your most recent stay in segregation status, how long were you held?
15 days

7) What **mental health treatments** are available to you when on segregation status?
None

8) How often are you contacted by **a mental health** practitioner? 1 a month
Typically, how much time do they spend with you? 1 hour

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
ART

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anger Management

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, ✓ NO.

Comments: BECAUSE WE ARE TREATED WITH DISRESPECT, WE GET NO PROGRAMS IN SEGREGATION THAT CAN HELP US WHEN WE ARE RELEASED.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
INTENSIVE MANAGEMENT, AND DISCIPLINE.

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 6 1/2 MONTHS

6) During this stay, or your most recent stay in segregation status, how long were you held?
6 MONTHS

7) What **mental health treatments** are available to you when on segregation status?
NONE, WE GET NO PROGRAMS AVAILABLE. OR PRIVACY IN COUNSELOR CONVERSATIONS.

8) How often are you contacted by **a mental health** practitioner? 1 TIME A MONTH
Typically, how much time do they spend with you? A FEW MINUTES

9) What **programs** are available to you in segregation status?
NO PROGRAMS ARE AVAILABLE.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? ART - AGGRESSION REPLACEMENT TRAINING WHICH IS COMPLETED

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I DONT KNOW WHATS AVAILABLE.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I DONT KNOW WHATS AVAILABLE.

Please provide any additional comments below:

Additional Comments regarding segregation status:

I THINK THEY SHOULD CHANGE RULES AND GIVE LESS TIME IN SEG. OR ROOM RESTRICTION IM PRETTY GROWING CRAZY.

OPTIONAL: Name _____ INMATE NUMBER _____

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
General population

4) How many times have you been on segregation status? Once

5) Overall, approximately how long have you been on segregation status? 12 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
12 days

7) What **mental health treatments** are available to you when on segregation status?
I do believe there are "dealing with anger" packets, but you have to ask for them. I have never seen one personally

8) How often are you contacted by **a mental health** practitioner? Once maybe every 2 weeks
Typically, how much time do they spend with you? 10-15 minutes.

9) What **programs** are available to you in segregation status?
NONE

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Domestic Violence program

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I'm not quite sure what there is to offer me. Something to show me guidance and self worth [redacted]

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Please provide any additional comments below:

Additional Comments regarding segregation status:

I would like to add: A lot of today's youth and population are mentally unstable, and don't even know it. I suffer from manic depression and run into people everyday who also show the same signs of having such disorders and are not being treated. I believe the prison system does not offer sufficient mental health programs (especially in segregation)

As being human beings we are expected to have "self worth" (knowing our lives are worth something) but being incarcerated and put in "seg" with no form of "upper" naturally diminishes our will to believe in something. people need to be shown the beauty of life instead of so much hate. Gardening is one good option. But maybe have a class and a speaker who talks about the good in life and showing people they are a somebody. I'd like to hear back

Thanks,

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: No Because Staff favor other inmates and are very nice to Certain inmates when requested to do things.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
6D/ max

4) How many times have you been on segregation status? 18

5) Overall, approximately how long have you been on segregation status? ~~[illegible]~~
1 year in a couple months.

6) During this stay, or your most recent stay in segregation status, how long were you held?
11 months

7) What **mental health treatments** are available to you when on segregation status?
my counselor.

8) How often are you contacted by **a mental health** practitioner? 2 times a week
Typically, how much time do they spend with you? 30 min to a hour.

9) What **programs** are available to you in segregation status?
None. They just times out types of things with me.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
to earn time back with the inmates as I progress with your behavior.

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Transition Back to the ~~general~~ general population. and like a Release program.

Please provide any additional comments below:

Additional Comments regarding segregation status:

By Release program I mean to Beable to Do more stuff. like work in city teen. ~~[illegible]~~ As ~~[illegible]~~

All in all As much like a helper for those who ~~are~~ Not Doing the right thing and is going home soon. they get Better in special Privileges. ~~[illegible]~~ Because the staff have no problems with them and they Do what there supose to Do without being told.

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: yes but they can come down more

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
is when I was there

4) How many times have you been on segregation status? 8 Times

5) Overall, approximately how long have you been on segregation status? 35 day

6) During this stay, or your most recent stay in segregation status, how long were you held?
~~8~~ about a week 10 day or so

7) What **mental health treatments** are available to you when on segregation status?
no ~~th~~ when I was down there

8) How often are you contacted by **a mental health** practitioner? monthly
Typically, how much time do they spend with you? 1 hour

9) What **programs** are available to you in segregation status?
NONE

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I help

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?

[redacted] [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, ✓ NO.

Comments: they aren't as helpful

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Disiplinary

4) How many times have you been on segregation status? 4

5) Overall, approximately how long have you been on segregation status? 5 1/2 yrs

6) During this stay, or your most recent stay in segregation status, how long were you held?
4 yrs 1 week

7) What **mental health treatments** are available to you when on segregation status?
transition program.

8) How often are you contacted by **a mental health** practitioner? 1 time a week / 1 time
Typically, how much time do they spend with you? varies

9) What **programs** are available to you in segregation status?
none

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? School ~~[illegible]~~

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
knowing myself better

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

none

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
Self [redacted] Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: A they need to treat us all the same way. Not Ack funny with one convict, But like the orther one.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Intensive management, Segregation

4) How many times have you been on segregation status? Six

5) Overall, approximately how long have you been on segregation status? 7 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
I Dont know

7) What **mental health treatments** are available to you when on segregation status?
I Dont know about treatment, But mental health they come around and talk to convict but that Dont help.

8) How often are you contacted by **a mental health** practitioner? once in awhile
Typically, how much time do they spend with you? hours

9) What **programs** are available to you in segregation status?
what programs we stay lock down 23 hrs a Day 1 hour out I have'nt seen or heard of any programs.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None at all what programs if it a program I want to get with it.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
to help me with the time I have, Start a Class to help people to [redacted] not what they Done.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

What Program explain to me [redacted] Some body

Please provide any additional comments below:

Additional Comments regarding segregation status: While lockdown we Should get the treatment we need most mental health teacher they Dont know how to help. They worring about your life and what you Done in got you here in Jail which it is important for them to know. I think they Should worry about the help they need and the futher And Now to keep us out of prison, Start one big class and have them to help us solve our problem, And Change The way we think and Provide the help we ask for.

I can go on But I Need Help also.

That all I Need

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: one thing about me am a very very honest person, and have no reason to lie on anyone.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
A.C. Administrative confinement

4) How many times have you been on segregation status? 4 or 5 times

5) Overall, approximately how long have you been on segregation status? this time 3 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
3 months last time 1 year

7) What **mental health treatments** are available to you when on segregation status?
mental health are available to all inmates in seg mostly to does who really really need them not me cause am not crazy by far,

8) How often are you contacted by **a mental health** practitioner? every day one comes around
Typically, how much time do they spend with you? 10 to 20 minutes depend on who th talking to,

9) What **programs** are available to you in segregation status?
when you're in seg mental health are the only program we can see really it's not that many programs i need to take cause like i sai am not crazy, i no right from wrong, and no what i have to do to stay out

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? anger manager programs are unavailable in seg i need to take, that's it, that's not in seg,

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
getting mad programs i need to take, control my temper that's it [redacted]

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

anygymanager programs, or learn to let things go programs like i said am not crazy or stupid, i no what i need to do to be a better person in society and in here

Please provide any additional comments below:

Additional Comments regarding segregation status: alot of guys in seg. because they did something to get there, dont let them fool you, some act crazy to get on med. cause they are so use to taking drugs on the streets not me, some are really really crazy and need help, but for the most part out of my 24 years locked i have seen most of them acting or playing crazy just for attention, real talk, guys tell about killing them selves and never do it, but want that attention, or sudden meds so they can get hi off of it. i could tell you all kind of stories about some of these inmates i have saw with my own eyes, mental health comes down talk to them, give them what they need, basically baby sit them, then they dont get what they want they go back to acting up, once they get they way its all good. Well i think god am ok, never has to go thought that.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: [redacted] Self

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, ____ NO.

Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Intering unarterizde area, Now PC

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 6 weeks

6) During this stay, or your most recent stay in segregation status, how long were you held?
NA

7) What **mental health treatments** are available to you when on segregation status?
I do not know

8) How often are you contacted by **a mental health** practitioner? Non
Typically, how much time do they spend with you? Non

9) What **programs** are available to you in segregation status?
don't know

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? don't know

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Non

[redacted] [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

my GED [redacted]

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
NO Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: I am held in segregation because they refuse to make the prison yard safe for all inmates, including protective custody.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
administrative custody & protective custody

4) How many times have you been on segregation status? ~~[illegible]~~ 1

5) Overall, approximately how long have you been on segregation status? since 3/25/2010

6) During this stay, or your most recent stay in segregation status, how long were you held?
since 3/25/10

7) What **mental health treatments** are available to you when on segregation status?
None

8) How often are you contacted by **a mental health** practitioner? every 3 months on questionnaire
Typically, how much time do they spend with you? about 2 minutes

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? anger management because of sentence

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
unknown

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

all that is available in general population

Please provide any additional comments below:

Additional Comments regarding segregation status: the prison administration has the policy to lock up the victims on PC and let the violent attackers back on the yard. No disciplinary action was taken against my attacker [redacted], even though they knew he assaulted me. This was not the first time as on 3/17/08 I was assaulted by 6 Disciples gang members of TSCI and received stitches in my face and had broken bones, and in 12/08 I was sexually assaulted by one cellmate and nothing was done to them for their actions. As long as these things are allowed to happen, nothing will change. The rule must be to lock-up the violent inmates who always attack others and not the victims. Treat us as humanbeings and not animals. Why, we can not even get hot meals here at LCC in segregation. Legal calls do not take priority over personal calls according to Warden Peart and Unit Manager Skaar and we are forced to sleep on "stack-a-bunks" which are only to be used for thirty days under federal court discretion. We must keep our clothes and food and paperwork on the floor so it can be destroyed by bugs and flooding because we are not provided with locker and cabinets like other prison facilities. We also get books that belong in the recycling bin. Treat us as humanbeings with the same privileges and property as other prison facilities and with hot food. Provide us with programs and counseling and not cruel and unusual punishment or you will have more Nikki Jenkins getting out of prison. Last, DOC should not be blamed for Jenkins whereabouts. Douglas County who he was released.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

— Attachment —

After all his sentence was up and DCS had no authority to hold him anylonger. Why Did Douglas County not step in and place him under a mental health hold and try to commit ~~him~~ him to the regional center, since DCS had no right to hold him behind his sentence. After all it is cruel and unusual punishment in violation of the eighth amendment to the U.S. Constitution to hold a man in 23 hour lockdown for years and years. What do you inspect? When you treat a person long enough as if he is an animal, ~~sooner or~~ sooner or later he will respond as an animal like Jenkins did. As for my self, I do not even have a TV because they broke it and are refusing to replace it, so I have nothing to keep my mind busy, like Jenkins was in segregation. How many more Jenkins is it going to take to force DCS to change there was on protective custody and administrative segregation status. Jenkins was a death sentence waiting to happen plain and simple, but ~~but~~ what about all of us other inmates. Please help us and force a change. I would be willing to testify before your committee and give you some idea since I have been locked up 40 years and have seen a lot of problems. [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES. _____ NO.

Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
A.C 7A SINCE 9.10.11 TO LONG...!

4) How many times have you been on segregation status? ONCE

5) Overall, approximately how long have you been on segregation status? 3yrs 13days

6) During this stay, or your most recent stay in segregation status, how long were you held?
3yrs 13days TO DAMN long, I get no way to succeed one mistake when I was 17yrs old

7) What **mental health treatments** are available to you when on segregation status?
people to talk to when they have time which is good considering all inmates

8) How often are you contacted by **a mental health** practitioner? once a month or less
Typically, how much time do they spend with you? 40 to 1hour depends (when a request form is put in)

9) What **programs** are available to you in segregation status?
None beside mental health practitioners AD for as programs none school S.D none

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? substance abuse V.R.P

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
just someone to talk to when needed which is fair for the most part

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

The programs that are on our plans but when on A.C

Please provide any additional comments below:

Additional Comments regarding segregation status:

Someone on A.C for whatever reason can not do their programing. Can cause problems for one who is returning to G.P or to society

Think About It

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, ✓ NO.

Comments: Mental health is non-existent and I've been waiting to see them for 3 month.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Administrative Confinement

4) How many times have you been on segregation status? Three

5) Overall, approximately how long have you been on segregation status? 20 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
4 months ongoing

7) What **mental health treatments** are available to you when on segregation status?
None

8) How often are you contacted by **a mental health** practitioner? Once
Typically, how much time do they spend with you? a minute

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? drug treatment

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
more talking to me to see where my head is at and that my meds are on the right level

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I dont know

Please provide any additional comments below:

Additional Comments regarding segregation status:

Mental health is non-exsistant down here and I've been waiting for three months to see the doctor about my medication, they do not do rounds just to check up and see if our mental health status is generally okay and to see if ~~we~~ we are doing well

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, ✓ NO.

Comments: a lot of Staff call me a bitch all the time but when we say Stuff like that we get M-R's

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
PC / IS

4) How many times have you been on segregation status? 4

5) Overall, approximately how long have you been on segregation status? 3/months

6) During this stay, or your most recent stay in segregation status, how long were you held?
3 months

7) What **mental health treatments** are available to you when on segregation status?
you get to talk to them

8) How often are you contacted by **a mental health** practitioner? ~~Twice~~ once a week
Typically, how much time do they spend with you? 5 min

9) What **programs** are available to you in segregation status?
~~Alcoh~~ you cant get programs in seg

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I.O.P you cant get on PC.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Non

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I.O.P G.E.D

Please provide any additional comments below:

Additional Comments regarding segregation status:

Staff Don't care cuz at the end of the day thay go home Thay Run ther mouth to much thay try to get us mad So thay Can give us M.R.'s our write up's I thant thay love to get us mad so we do some thing to them and thay hand out are mail to other inmate's

I hope you look in to thes matter's Soon

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: There is too much paperwork for them to pay any attention to our needs

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Immideate Segragation

4) How many times have you been on segregation status? 1 time

5) Overall, approximately how long have you been on segregation status? 3 Muths

6) During this stay, or your most recent stay in segregation status, how long were you held?
_____

7) What **mental health treatments** are available to you when on segregation status?
Once a month for medication adjustments

8) How often are you contacted by **a mental health** practitioner? Once a month
Typically, how much time do they spend with you? 15 minutes

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I don't Know

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

School

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

   Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
   Mental Health

4) How many times have you been on segregation status? 5

5) Overall, approximately how long have you been on segregation status? 1 week

6) During this stay, or your most recent stay in segregation status, how long were you held?
   1 week

7) What **mental health treatments** are available to you when on segregation status?
   your counselor

8) How often are you contacted by **a mental health** practitioner? Once
   Typically, how much time do they spend with you? 1 day

9) What **programs** are available to you in segregation status?
   none

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? NA

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
   NA

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

NA

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: sometimes Rude and unfair

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)

4) How many times have you been on segregation status? more than 10

5) Overall, approximately how long have you been on segregation status? _____

6) During this stay, or your most recent stay in segregation status, how long were you held?

7) What **mental health treatments** are available to you when on segregation status?
none

8) How often are you contacted by **a mental health** practitioner? not often
Typically, how much time do they spend with you? _____

9) What **programs** are available to you in segregation status?
Crit none

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? none

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
a transition program from SE & to GP would be Nice

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Same

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: Jessie J. Vicaurre

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, ____ NO.

Comments: Because I've come as far; For Discharge planning.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective custody

4) How many times have you been on segregation status? 5

5) Overall, approximately how long have you been on segregation status? 1 month

6) During this stay, or your most recent stay in segregation status, how long were you held?
1 month

7) What **mental health treatments** are available to you when on segregation status?
Being put on the transitional program and Being put on level E.

8) How often are you contacted by **a mental health** practitioner? all the time
Typically, how much time do they spend with you? some: overall

9) What **programs** are available to you in segregation status?
Level E. and Being put on transition From NSP.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Pretty much Discharge Planning. and Being put Back in the (community:) in (LBGS.)

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
to seek new challenges in General pop. And to succeed in a Group Ho[redacted]

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Substance Abuse and aftercare

Please provide any additional comments below:

Additional Comments regarding segregation status: Over All I think the MHP has made me the man I try to Be For my Family and friends and it has helped me in the longrun to make Better decisions in my life regarding my social skills and to Be Assertive in other ways to accomplish the goals I need to make a Better future. For myself, and Hopefull Sucsed in make the Best For my siblings.

THANX

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here Christopher Duffek Printed name: Christopher Duffek

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, ✓ NO.

Comments: They are alway eating talking on the phone or doing what ever they want

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
in the mental health unit

4) How many times have you been on segregation status? 4

5) Overall, approximately how long have you been on segregation status? 2 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
2 years

7) What **mental health treatments** are available to you when on segregation status?
Meds counsler and other staff

8) How often are you contacted by **a mental health** practitioner? one a week
Typically, how much time do they spend with you? 1 hour

9) What **programs** are available to you in segregation status?
classes counsler med that its nothing else

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? you have go to mental health unit for that

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
transition program is sucessful enough to learn from their mistakes thank you

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anger management violence prevention

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: We are treated like crap. I haven't been seen by mental health about some issues I have.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody

4) How many times have you been on segregation status? Once

5) Overall, approximately how long have you been on segregation status? 4 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
4 months

7) What **mental health treatments** are available to you when on segregation status?
Medication

8) How often are you contacted by **a mental health** practitioner? Once since I've been here
Typically, how much time do they spend with you? 20 min

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I don't have a plan yet.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Counseling, anger management classes

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Schooling,

Please provide any additional comments below:

Additional Comments regarding segregation status:

I've written "inmate request forms" to mental health and was told I would be seen. 2 months later I still haven't been seen. We are locked down in our cells 22 hours a day. There are no programs to keep my mind occupied, or to better myself. Nothing to prepare me for life outside of prison. I witnessed a murder that gives me nightmares and messes with my head. I need help. I need to talk to someone. I need stuff (programs) to keep my mind occupied. instead I'm in my cell all day with my thoughts and memories. It drives me crazy thinking about what happened to my friend and what my life turned out to be because of all this. And to be talked to by staff like shit is enough to push someone over the edge.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, ✓ NO.

Comments: Professional: yes / appropriate: no / fair: no [redacted]

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Disiplinary segragation.

4) How many times have you been on segregation status? this is my first

5) Overall, approximately how long have you been on segregation status? will be 30 days on 9/8/14

6) During this stay, or your most recent stay in segregation status, how long were you held?
30 days

7) What **mental health treatments** are available to you when on segregation status?
I Have not Been offered any.

8) How often are you contacted by **a mental health** practitioner? Never
Typically, how much time do they spend with you? None

9) What **programs** are available to you in segregation status?
None that I Have Been told about.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Ged, B-Help,

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
talking to a Psych maybey? Just for the ability to talk to someone about [redacted] anxietys.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

a class on Discipline maybe? (self Discipline).

Please provide any additional comments below:

Additional Comments regarding segregation status:

I am currently in cell [redacted] in C-unit. I wasnt going to write anything in this part But somthing Disturbing Happened today and im very sure its not the first time. It started out, I was Reading at my table when I Heard the old man in cell C-L 31 start yelling "Nock it off!!". So I get up to see Whats going on and when I get up to look I can see the inmate in C-L30 Beating on the aJoining wall of 30 and 31 RepeatedLY. the old man in 31 kept trying to get a C.O. to Help But they kept ignoring Him for about 20 mins. When they finally talked to them they kept Blowing it off Like He was crazy. I told Both the C.O. that talked to Him and the Unit manager that talked to Him and told them that I Saw Him Beating on the wall and they Both Blew it off and I dont think anything was ever Done.

thank you for Reading!!

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: No Because they over power they Athority. They don't let us out of the cells for the whole weekend.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Im no longer in Segregation im in General pop.

4) How many times have you been on segregation status? once

5) Overall, approximately how long have you been on segregation status? 2 weeks

6) During this stay, or your most recent stay in segregation status, how long were you held?
17 days

7) What **mental health treatments** are available to you when on segregation status?
Not Sure they Never Said anything bout it.

8) How often are you contacted by **a mental health** practitioner? once
Typically, how much time do they spend with you? _____

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? N/A

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
N/A

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Please provide any additional comments below:

Additional Comments regarding segregation status: I don't like the whole Situation about the segregation. They don't let People take Showers on weekends or us the phones on weekend. And the guards talk crazy to the inmates. And when the inmates say some think back to the guards they write you up.

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: Although Some staff Members and Prison Administrators Are very disrespectful to Inmates

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective custody (PC)

4) How many times have you been on segregation status? once PC

5) Overall, approximately how long have you been on segregation status? 1 year PC

6) During this stay, or your most recent stay in segregation status, how long were you held?
1 year PC

7) What **mental health treatments** are available to you when on segregation status?
Mental Health Treatments are available to PC Inmates (Mental Health Treatment such as counselling and getting medication; Not Programming)

8) How often are you contacted by **a mental health** practitioner? About 1 time every 3 months
Typically, how much time do they spend with you? 10 - 15 minutes or as long as you nee

9) What **programs** are available to you in segregation status?
There are no Programs available to us in Protective Custody

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? O - Help

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
No Mental Health Treatment is needed. I just need to do my programming So I can return to society and be productive.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I need to do my O-Help program.

Please provide any additional comments below:

Additional Comments regarding segregation status:

We need programming in Protective Custody so we can finish our Individualized plans.

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
protective custody

4) How many times have you been on segregation status? 10

5) Overall, approximately how long have you been on segregation status? 10 yrs

6) During this stay, or your most recent stay in segregation status, how long were you held?
7 days

7) What **mental health treatments** are available to you when on segregation status?
None

8) How often are you contacted by **a mental health** practitioner? every 3 months
Typically, how much time do they spend with you? 2 mins.

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Drug and alcohol program.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
The IN patince program on D-unit.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

The Inpatient program on D-unit.

Please provide any additional comments below:

Additional Comments regarding segregation status: It would be nice if there were 15 mintues per person for the showers. And more time to be out during yard time! And they should be more time for us to get hot water and ice!

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: I believe that because I write grievances over many issues (lack of treatment, No personalized plan, ect. ect.) Staff at all levels treat me like public enemy #1. But its the only way to get staff to do their job and still they dont answer many kites or grievances at all or way past the time limits.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
INVOLUNTARY PROTECTIVE CUSTODY.

4) How many times have you been on segregation status? once

5) Overall, approximately how long have you been on segregation status? 5 months about.

6) During this stay, or your most recent stay in segregation status, how long were you held?
5 months and counting

7) What **mental health treatments** are available to you when on segregation status?
1 45 min session a month if I request it. And a medication review about 90 days if I request it. Nothing is done without me requesting it. They have No "Treatment" in the Protective custody.

8) How often are you contacted by **a mental health** practitioner? Once a month at my request
Typically, how much time do they spend with you? about 30 to 45 mins. IF No Request Never

9) What **programs** are available to you in segregation status?
NONE,

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? SAU./RTC (which it took a letter to you and a grience to get my individualized plan done but 90% of the other inmates on A Unit dont have one.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
A type of Pre-lease, Social type Program to work with the outside so we can get use to people outside of prison.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Substance Abuse treatment like SAU/ IOP / OP ect. and any type of mental Health program.

Please provide any additional comments below:

Additional Comments regarding segregation status: For the whole time I have been on segregation status. I never get interviewed about my concerns, a chance to refute any of the information. Not once Have I ever got Reviewed by the Restrictive Housing Review Board. this does not happen. We are just locked up in our rooms and no one talks to you. It takes grievances to get anything done and thats if they even answer them. Many of my Rights to hearings and Interviews outlined in AR 201.04 Never happen and this is a violation of my rights to classification Appeals.

Also Sir I have more information that concerns the fraud of get government grants while I was at CCCL Look into the Prairie Gold Homes program. Staff at CCCL and prairie Gold Home forced many of us inmates to sign paperwork stating we were "TAKING" the program so they could get the grant $. I was threatened by Dept staff and Prairie Gold Homes to sign and submit my SS # over and over again so they could get the $. If I didn't I was told I would be removed from community and sent to the Deepest Darkest Hole in the Dept this was Larry Wayne, Rex Richard, Ken Inness Denise Stehect. Many inmate signed up but never took the course. As I stated I will testify in front of your committee under purjury to any and everything that I have wrote and any other questions you may have abo.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

P.S. Many cells in A-Unit flood every time it rains and [illegible] will not fix this and [illegible] military are [illegible] ms. [illegible] The restrictive Housing or the lack of anything for us.

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, ____ NO.

Comments: Apropriate, yet ineffective. Lack of Services.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody

4) How many times have you been on segregation status? I Have been in Protective Custody My Entire Stay with DOC.

5) Overall, approximately how long have you been on segregation status? 1 year 2 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
Same As Above

7) What **mental health treatments** are available to you when on segregation status?
The phychiatrist, Counselor. I have waited months to Speak with Someone - I Am Having a very Hard time being Stable

8) How often are you contacted by **a mental health** practitioner? Rarely.
Typically, how much time do they spend with you? 15 minutes

9) What **programs** are available to you in segregation status?
None - I Am Not Even Able to have a "Job" therefore I Worry where I will get what I Need.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I Have No recommended programming.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I do say Anything. Parenting Classes, Cognitive Thinking, the "professionals" Should have Better Recoomendations than they do.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Why is "Mental Health" different from "Programming"

Please provide any additional comments below:

Additional Comments regarding segregation status:

I Am in P.C. Due To being labeled a "Snitch" I Am forced to be here By General Population Inmates. I Struggle from mouth to Mouth Just getting Soap and Shampoo to Shower with. I Cannot have a Job Because there are None Available. All positions Are Always filled. this is the most Stressful Element of "Segregation". Indigant Status Provides Little to ~~no~~ Nothing. I Should Not Stress Every day in Prison About how I Am going to Get By Month to Month, Week to Week. General population Inmates Are required to have A "Job" And Make a Minimum of $1.21 per day. Thats About $25 A month. I would do Any Job to be blessed with $25 A month. It would provide Some Stability in life here and an overall More positive Mental State. I Am forced to Break the rules And Jeaprolize My Parole By Selling My Artwork to other inmates. I get paid with Hiegene Items. If a Man Cant provide for himself How is he a Man.

Thank you for your Time

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: From what I Seen "Mental Health Providers" do a Great Job.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
IS - PI - Pending Investigation

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 57 Days

6) During this stay, or your most recent stay in segregation status, how long were you held?
42 Days

7) What **mental health treatments** are available to you when on segregation status?
NOT Sure - don't use Mental Health.

8) How often are you contacted by **a mental health** practitioner? Every 2 weeks
Typically, how much time do they spend with you? Depends on the Individual.

9) What **programs** are available to you in segregation status?
There is Law Library - Mental Health - Book cart. NOT really Any programs.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? SAU

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
None - Don't use Drugs and NOT Mentally ILL.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

NOT Sure.

Please provide any additional comments below:

Additional Comments regarding segregation status:

Things that I would Highly recommend.

(1.) I've been on "PI" for over 30 Days. LCC and DEC or DEC and LCC do a Horrible job communicating to each other.

(2.) I think the Canteen Levels fNeed to change - (1.) For a "PC" just enters Seg. why would that Individual have to wait Months to get Food when he Never came to Seg for Trouble. OR (2.) Like Myself, I am on "PI" with NO write up, NOT fair that I can't Buy food because I am NOT on a certain Level.

(3.) I did time in CA prison / and NE prison is way Different. I truly feel if some procedures are changed it would be better for the institution.

If would like advice - Feel free to interview me.

(4.) When you Enter DEC they hand you a green Book which contains the Rules. on A Class 3 write up I brought that Book and showed the Hearing officer what contains in it. Still found guilty and Hearing Officer said we Don't go by those Books. Than why pass them out.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

9-9-14

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: Lance McCord (case worker) is a vengeful & antagonistic person. He makes up his own rules and use those to "poke the bear" of inmates he knows he can get a recation from. Then lie constently about it & what happened on report. I have witnessed this many times w/ other inmate.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.) protective custody

4) How many times have you been on segregation status? 2X

5) Overall, approximately how long have you been on segregation status? 3 years

6) During this stay, or your most recent stay in segregation status, how long were you held? 2½ yrs / 1yr

7) What **mental health treatments** are available to you when on segregation status? seen Mental Health 2X, on medication all within the last year.

8) How often are you contacted by **a mental health** practitioner? 2X in last year
Typically, how much time do they spend with you? 5-10 min.

9) What **programs** are available to you in segregation status? (1) 2 half day class on Victim Impact.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I Help (inpatient sex offender program)

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison? I need to attend I Help to successful complete my treatment, but they force you to go to general population to get your treatment. Therefore since I can't go [redacted] needed treatment because I will be harmed, I will be civilly committed to the Regional Center at the end of my sentence.

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

(Same Answer as #11.)

Please provide any additional comments below:

Additional Comments regarding segregation status: Our "Law Library" has been reduced down to nothing. All we have is a computer on the unit to look up case law, w/ very limited help from paid legal aides. Any legal aide help needs to be preapproved by the Deputy Warden. Also we are no longer able to type out our legal papers. We are no longer have access to legal resource books that are in the Law Library, resourses that are not available on the computer.

I ask that PC have the same rights that GP (general population) does now with the access of the Law Library resources, typewritter, & legal aides. I ask that we may have restored to us, the one hour a week access to the law library that we have had for years, prior to the change about 8 months ago. During that one hour a week, we have had access to the computers, typewritters (which there are eight of), resources books, and two legal aides.

I ask, what is the justification to now restrict our access to the much needed help of legal aides, resources books (info not available on the computer), and typewritters to type out our legal forms. These are basic needs to do any kind of legal work.

At the very least, I ask to have one of the eight typewritters (3 of which are never used) available on the unit w/ the "law library" computer, so that we can type out our legal work to make it ledagable. I should also say, we need the typewritter supplies w/ it. Also easier access to legal aides by a simple request – no request should be denied for any reason.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

Thank you for your help! It is greatly appreciated.

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: I watched while in Seg. inmates get out way before I, for Serious offenses when ive had no Misconduct Report.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Administrative Confinement

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 4 1/2 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
2 years +

7) What **mental health treatments** are available to you when on segregation status?
None

8) How often are you contacted by **a mental health** practitioner? 1 every other month
Typically, how much time do they spend with you? less than 30 Seconds

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? all programs on my individualized plan are unavailible to me due to my Sentence Structure

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
LONG Term SEGREGATION PERIODS is What Causes Mental Health ISSUES!

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Interaction with others.
Staff to treat people like people.

Please provide any additional comments below:

Additional Comments regarding segregation status:

Long term periods in Seg is cruel and inhumane

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
N/A Printed name: N/A

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, ✓ NO.

Comments: Staff Are Biased Against sex offenders Mental Health is good But Short Staffed, And Administraters are also Biased Against Sex offenders (very seriously)

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Voluntary pc

4) How many times have you been on segregation status? Twice

5) Overall, approximately how long have you been on segregation status? 2½/3 yrs

6) During this stay, or your most recent stay in segregation status, how long were you held?
1 3/4 yrs

7) What **mental health treatments** are available to you when on segregation status?
I get my pills and rarely see mental Health

8) How often are you contacted by **a mental health** practitioner? 3x A year
Typically, how much time do they spend with you? 1 hr Sometimes 1½ hrs

9) What **programs** are available to you in segregation status?
Ged only

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? SAU B help or whatever

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I'm in good Shape So long As I maintain my Bipolar Disorder [redacted] frequent meetings [redacted] my lithium pills This will Have to be maintained when I return to Society

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I have to watch my drinking so probably SAU and as far as my charges I would think B Help at least that was what I was told when I was at D And E

Please provide any additional comments below:

Additional Comments regarding segregation status:

I Dont Really like it in seg cause I'd like to get out more However Both times Ive been In the yard the harassment By the gangs has been terrible, It allways leads to a fight when they are Constantly Asking for rent or protection either in the form of money or Store. A lot of the gaurds turn Away when this happens exacerbating the problem they eit Are on the take themselves or just Dont care. It's Bad enough most of us have long sentences But Don't lock us up so much give us in pc some yard time during dayroom so where not so fiesty in the evening. And little things help two spanish Stations would be great!!

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: I have seen staff [redacted] members pick on some inmates by making them lock-down when the inmate had to use the restroom during school.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
I am in protective custody.

4) How many times have you been on segregation status? One time.

5) Overall, approximately how long have you been on segregation status? two years, four months

6) During this stay, or your most recent stay in segregation status, how long were you held?
I have been on Protective Custody for 2 years and 4 months.

7) What **mental health treatments** are available to you when on segregation status?
Very limited! And that's only when you tell them what they want to hear and not the truth.

8) How often are you contacted by **a mental health** practitioner? Once every three months.
Typically, how much time do they spend with you? About thirty seconds.

9) What **programs** are available to you in segregation status?
The only "Program" that I am aware of on this unit is school.[redacted]

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? [redacted]
I don't Know!

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Treatment for Depression, Anger, Medication only when it is really needed.

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

When on "Segregation Status," the programs that would help the most is "Mental Health Programs that deal with; Depression, Anger management, Angziaty, and many more.

Please provide any additional comments below:

Additional Comments regarding segregation status:

As a Tutor for the school here at L.C.C. I know that the G.E.D. tests are now conducted on the computer. Students need to type their answers on the computer. But many of the students don't even know how to turn a computer on, let alone how to type. More importantly, the G.E.D. Tests are timed. By not providing adequate instruction on the computer, the inmate is being set up to fail.

When the inmate leaves the institution, he(or she) has an extra strike against them. Along with being an ex-con, they have no idea how to use a computer in a computerized world. Therefore, the inmate is destined,(in most cases) to reoffend and return to prison.

For one idea to solve at least part of the problem, see the artical in the Nebraska Criminal Justice Review, (the December 2013 issue). The aricle was entitled; "Computers and Computer Skills needed," please read that article. IF you cannot find a copy, you can get a copy of the "Original" which is titled; "To all who are concerned with proper education" by Herman Hamilton #75303, or Roger McPherson #_____. They will be happy to get you a copy.

This is just one idea that has a potential to keep inmates from coming back into the prison system.

Another idea is for mental health personel to pay attention to the inmate. When I first went to see them, I was asked if I was ready to confess to something that I didnot do. When I said, "No! I didn't do that!" they told me; "I can't help you while you are in denial." That was about 2½ years ago. They have not taken me again.

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
NO Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: they lock up veterans and let the predators run free on the yard. No meals/ health for veterans

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
protective custody & administrative confinement

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 5 1/2 hrs

6) During this stay, or your most recent stay in segregation status, how long were you held?
3 1/2 years

7) What **mental health treatments** are available to you when on segregation status?
none

8) How often are you contacted by **a mental health** practitioner? every 3 month about
Typically, how much time do they spend with you? about 1 minute

9) What **programs** are available to you in segregation status?
~~[illegible]~~ GED only

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? anger management because of crime

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
counselor, other than assistance in looking housing, jobs, money and such to live.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

unknown

Please provide any additional comments below:

Additional Comments regarding segregation status: There is no mental health programs as they claim they donot have time to talk to every one, so you must be on C2 (cells 1 to 8) for any type of counseling and those are the inmates scheduled to go to D-unit (mental health unit). This is discriminatory in nature as who to pick and who not to. Now, there are in retaliation of this committee plans to move all ACSPC inmates from LCC C-unit to other prisons even if it endangers their life according to Director Kenney and unit staff. My safety would be endanger at another prison and even at the PC Units, per Warden Peart and the DCS Appeals Board & the Directors Sub-committee. They donot care about this. Mental Health give free TV's only to mental health patients, and so does Warden Peart and Major Deltz. This is discrimination in practice. All they want to do is dope you up and throwaway the keys until your parole or discharge. No wonder we find Nikko Jenkins types on the street. Thread out the good-o-boy system of corrections and make changes that will work under a new administration from outside of Nebraska.

Director Kenney is even showing special privileges to Nikko Jenkins who was convicted of 4 Killing that no one else gets, like extra law library time, TV set, radio, extra canteen. He should be under D-level see Safekeep, but was placed on A-level per Director Kenney.

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
NO Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: Some staff belittle you. Unsatisfactory med distributation, spilling, dropping, loosing. Refusing clothing issue replacement or make you beg for it

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
protective custody - self

4) How many times have you been on segregation status? one

5) Overall, approximately how long have you been on segregation status? 14 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
same

7) What **mental health treatments** are available to you when on segregation status?
NONE

8) How often are you contacted by **a mental health** practitioner? Monthly
Typically, how much time do they spend with you? 2 minutes to answer form questions.

9) What **programs** are available to you in segregation status?
NONE

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? unknown

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I am Institutionalized at this point due to the length of time incarcerated. Type help that would be available to me upon release.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Jobs while in segregation - self betterment. Rehabilitation paying jobs

Please provide any additional comments below:

Additional Comments regarding segregation status: Access to simple necessities, such as clothing issue, medication, etc., needs to be addressed. Sanitation of medication dispensing needs to be re-taught as at least one caseworker uses contaminated sterile gloves. He uses "Keeside" chemical to wipe off his gloves after touching many contaminated doors, etc. He spills a lot of the medication on his gloves and the counters. Sometimes medication's are lost and according to the staff that lost it, won't get medical to replace it. Clothing Issue seems to have a problem replacing lost clothing, etc. Sometimes taking several months to replace items, if even then!

Some staff seem to disrespect inmates alot. You can't get a reply on your kites. You write kites and never receive the "yellow" copy back, so, you don't know if your kite was received. If you ask about it, you are told "don't worry about it!"

We should all have access to jobs here as alot of us are not here for disciplinery reasons. We have chose to be here due to the policies of corrections. They condone the bullies in the institution and punish those that try to go by the rules. They need to segregate the bullies — this would be a lot less segregation than putting the rule followers in segregation. They let the bullies rule the prison. If they only locked away the bullies and not the innocent — this problem would stop.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

The bullies know that they can go on and on doing it and only get a few days in the hole. They use the new kids

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2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: the Provider is here at LCC once An week And I have only seen once in 6 month's.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody Leval 5A

4) How many times have you been on segregation status? Once

5) Overall, approximately how long have you been on segregation status? 5 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
Dont Know I'm Not 100% Sure it is safe for me

7) What **mental health treatments** are available to you when on segregation status?
None I Would Like to go Back And have An 2nd Chance on the mental Health unit. But they tell me I Dont have An major mental Illness

8) How often are you contacted by **a mental health** practitioner? Once An month for counceling
Typically, how much time do they spend with you? ½ hr to 1hr

9) What **programs** are available to you in segregation status?
Just the Leavels Program, mental Health limited Dental, medical, Eyecare,

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None that I Know of

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
the mental Health unit But they think I'm Lyeing About my mental Health. I was scared of Being Judged or hurt Becuse of my crime (None) Because I Dont have An major mental Issue

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

None Becuse I'm in Restrdated Houseing

Please provide any additional comments below:

Additional Comments regarding segregation status:

I BeLive that the StaFF Does Not Under Stand the FeaR that I have there Just Acting Like they Dont Care. I Will say if I have An emergance that they come And Speck to me. But Unit StaFF tell me that they need Bed SPace I feel Like Bed SPace is More inPortant then me AS An IDividual.

Sorry About the SPelling I Hope You Got What You Need ed.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

feel free to contact me for Further Info.

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, ✓ NO.

Comments: We are not given the proper amount of appropriate help when needed. Mental Health only comes around once every 3 months.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 1 yr.

6) During this stay, or your most recent stay in segregation status, how long were you held?
Nov. 2013 – Present

7) What **mental health treatments** are available to you when on segregation status?
For sex offenders, the only treatment available is CSoRt which is not available until we are within 2yrs. of our TRD. Other than that there is none.

8) How often are you contacted by **a mental health** practitioner? every 3 months
Typically, how much time do they spend with you? 5 minutes

9) What **programs** are available to you in segregation status?
GED is available to inmate who do not have a high school education. There are no other programs available.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? The only program I am going to have to participate in is sex offender treatment which is not available until I am within 2yrs. of my release date.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
It would help if the sex offender treatment was available during an inmates entire encarceration. If it was available for more than a couple years you would have [redacted] less people reoffending and going back to prison.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Reenntry programs would greatly help inmates return to society a lot easier.

Please provide any additional comments below:

Additional Comments regarding segregation status: One thing that would greatly help out in protective custody is, if jobs were available to all inmates. TSCI is the only facility that offers jobs to all inmates on protective custody. There are quite a few inmates that do not have the luxury of family and friends sending them money on a regular basis. For those of us without money coming in at all we are forced to rely on indegent status for our personal needs. I my self am allergic to the indegent soap so I can not use it. I have to trade things to other inmates so that I can get soap from the canteen. If jobs were available to all inmates on protective custody this would not be an issue I would have to deal with.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
N/A Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: PEOPLE IN PROTECTED CUSTODY ARE VIEWED AS A BURDEN. THERE ARE NO PROGRAMS (OTHER THAN G.E.D) AVAILABLE

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
PROTECTIVE CUSTODY

4) How many times have you been on segregation status? SEVERAL

5) Overall, approximately how long have you been on segregation status? 10 YEARS

6) During this stay, or your most recent stay in segregation status, how long were you held?
FEB 08 - July 13 / FEB 14 - PRES

7) What **mental health treatments** are available to you when on segregation status?
IF REQUESTED & DEEMED NECESSARY, ONE ON ONE SESSION W/ MENTAL HEALTH WORKER

8) How often are you contacted by **a mental health** practitioner? MAYBE ONCE EVERY 6 MO. Typically, how much time do they spend with you? 3 MINUTES (LONG ENOUGH TO ASK YOU - "WHAT DID YOU HAVE FOR BREAKFAST, WHO IS THE PRESIDENT ARE YOU SLEEPING WELL, & DO YOU KNOW HOW TO GET AHOLD OF US")

9) What **programs** are available to you in segregation status?
NONE (OTHER THAN G.E.D.) WE ARE NOT OFFERED PROGRAMS IN P.C. & ARE TOLD IT'S DUE TO "NOT ENOUGH STAFF" TO PROVIDE SECURITY

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? OUT PATIENT DRUG TREATMENT

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
RE-ENTRY TYPE PROGRAMS. TRANSITIONAL FOCUSED BASIC LIFE SKILLS.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

LIFE SKILLS, LIASON W/ COMMUNITY BASED PROGRAM PROVIDERS

Please provide any additional comments below: " IT IS THE RESPONSIBILITY OF THE DEPT TO MAKE PROGRAMMING AVAILABLE TO ALL INMATES"
FORMER DOC R. HOUSTON

Additional Comments regarding segregation status: IN ORDER TO BE PLACED ON PROTECTIVE CUSTODY STATUS YOU HAVE TO EITHER REQUEST IT, OR HAVE IT DEEMED NECESSARY BY THE ADMINISTRATION, & HAVE IT IMPOSED ON YOU. EITHER WAY AN INMATE IS APPROVED FOR P.C. ONLY AFTER AN INVESTIGATION by A DESIGNEE OF THE WARDEN & ONLY AFTER THE NEED FOR SUCH PLACEMENT IS VALIDATED. PERSONS IN THIS UNIT ARE THERE FOR THEIR PROTECTION — NOT FOR ANY DISCIPLINARY REASONS, YET THE UNIT IS RUN AS IF IT IS A DISCIPLINARY UNIT. INMATES ARE LOCKED IN THEIR ROOMS FOR APPR. 23 HR A DAY, THERE ARE NO PROGRAMS AVAILABLE, & EVEN THOUGH THE PAY SLOTS ARE AVAILABLE FOR JOBS, THE JOBS ARE ONLY GIVEN TO A SELECT FEW, LEAVING MOST TO RELY ON OUTSIDE FINANCIAL SOURCES, OR IF NONE AVAILABLE, SELLING THEIR MEALS TO AMASS ENOUGH TO GET BASIC NEEDS MET. THIS SHOULD NOT BE — JOBS SHOULD BE AVAILABLE TO ALL.

THE OTHER FARCE IS THE PAROLE HEARINGS / PROGRAMMING CATCH-22. WHEN YOU GO SEE THE PAROLE BOARD THEY TELL MOST PEOPLE THAT THEY CAN NOT BE SET FOR A HEARING BECAUSE PROGRAMMING HAS NOT BEEN DONE. THIS IS UNDERSTANDABLE. YET WHEN THE INMATE REQUESTS PROGRAMMING, THEY ARE USUALLY TOLD "NO" BECAUSE THEY DON'T HAVE A PAROLE HEARING SET & ARE TOO FAR AWAY FROM THEIR TRD. SO, YOU CAN'T GET A HEARING W/O PROGRAMMING, & YOU CAN'T GET PROGRAMMING W/O A HEARING SET.

GETTING PROGRAMMING FOR PC INMATES PRESENTS ANOTHER SET OF PROBLEMS. AS THERE ARE NO PROGRAMS AVAILABLE TO P.C. INMATES, ONE MUST GO TO THE INSTITUTION WHERE THE PROGRAM IS OFFERED. THIS ACTION BY THE ADMINISTRATION PUTS MANY AN INMATE AT GRAVE RISK, MAKING THEM CHOOSE BETWEEN THEIR SAFETY OR THEIR PROGRAMMING. REMEMBER, THE A. HAS ALREADY ESTABLISHED A VERIFIED NEED FOR THE INMATES PROTECTION.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

WHAT A CHOICE, FACE PROBABLE BODILY HARM TO GO TO TREATMENT THAT MOST P.C. INMATES ARE FORCED OUT OF AFRAID COMPLETING OR DO THE WHOLE

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: Mental Health has help me More the staff, prison administrators

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
AC/PC

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 2 Months

6) During this stay, or your most recent stay in segregation status, how long were you held?
2 Months

7) What **mental health treatments** are available to you when on segregation status?
We Must ask to see the Mental Health if we want to talk. But in the past alot.

8) How often are you contacted by **a mental health** practitioner? 2 Month
Typically, how much time do they spend with you? 1 hour

9) What **programs** are available to you in segregation status?
None - I ask to finish my GED Still Waiting.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Help with my Meds and treatment

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

VRP/School/Drug treatment

Please provide any additional comments below:

Additional Comments regarding segregation status:

Maybe Health Really help me just talking about my problems and having some listen got a lot of stress off my chest.

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
N/A Printed name: N/A

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: staff in PC has minimal contact with inmates and show no concern toward us or our grievances

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody

4) How many times have you been on segregation status? once, currently for 3 1/2 years

5) Overall, approximately how long have you been on segregation status? 3 1/2 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
N/A

7) What **mental health treatments** are available to you when on segregation status?
about once a month mental health staff comes and asks if we are ok. single sessions last about 15-20 min

8) How often are you contacted by **a mental health** practitioner? about once a month
Typically, how much time do they spend with you? 2 min.

9) What **programs** are available to you in segregation status?
None. We constantly request them but staff seems unconcerned about our situation.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? RTC

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I can't answer that truthfully. I don't know of any program through mental health. My Case Manager hasn't discussed anything with me as far as mental health options

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

DTC. Some inmates need SATI and other programs of the like. inmates have been denied parole due to the lack of programing.

Please provide any additional comments below:

Additional Comments regarding segregation status: I've been in Protective Custody for more than 3 years. During this time there hasn't been any effort by staff to ensure our success by bringing programs to this unit. Our requests and inquiries have went unanswered. Cooperation with inmates by staff is non-existant. Contact between us still remains at a minimum. It truly seems like we are being punished for being in Protective Custody. We are locked down for 22 hours out of the day in a cell that is too small for two inmates, while we haven't broken any rules or regulations, we continue to be treated as such. Being locked down 22 hours a day continues to have a negative impact on our mental health as well as our physical health. We are constantly subjected to highly stressful situations in which we can't escape. We've asked repeatedly for solutions to these problems and are met with some off-handed standard response which adds greatly to our frustration. The professional attitude and work ethic of this staff is appalling. We have staff members that constantly break rules and regulations. When we attempt to grieve the situation, the responses are "the staff denies these allegations" or your claim has been unfounded. We are then subjected to retaliation by staff because we've reported injustices that are directed or done towards us. I implore you to visit and ask the staff for their perspective and then ask the inmates

OPTIONAL: Name _____ INMATE NUMBER _____

our perspective and you will find a wide gap in views. This needs to be addressed and fixed. We are all aware

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: I am not offered my treatment, and alot of the Staff treat US bad as far as treat my US like people they treat US like Animals

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective custody

4) How many times have you been on segregation status? 6 times

5) Overall, approximately how long have you been on segregation status? about 2 1/2 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
5 days

7) What **mental health treatments** are available to you when on segregation status?
In pc Just GED we don't have access to anything Else

8) How often are you contacted by **a mental health** practitioner? 1 time every 6-8 weeks
Typically, how much time do they spend with you? 10 minutes

9) What **programs** are available to you in segregation status?
GED that's all

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? NRTS and THELP treatment

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
My Recomended treatment then Life and Job Skills Classes to teach us how things will be now as Fedns THELP

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Job and Life skills and classes to show us how to deal with problems getting Jobs and stuff as Felons

Please provide any additional comments below:

Additional Comments regarding segregation status:

The protective custody Inmates at LCC are Not offered any programming Except for GED classes. Most of us have other treatment Requirements to meet to be Eligable for parole and also for Release, But we don't have access to them.

Me for Example I Need to do THELP and NRTS, But cannot go to General population Because I will be physically Assaulted Because of My crime and my decision to Not pay what Inmates in GP call (Rent).

The staff here do not treat us fairly at all. we are constantly Lied to and often Not even acknowledged By Staff.

I have been trying to move from my cell Beouse of alot of Issues and have told My unit manager, But am constantly shot down or don't even Recieve a Response.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
N/A Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: White inmates receive more attension & better treatment than Black inmates. Given better options.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
involuntary PC to PC AC

4) How many times have you been on segregation status? Many / 10+

5) Overall, approximately how long have you been on segregation status? 2-3 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
2 months - Still being held.

7) What **mental health treatments** are available to you when on segregation status?
You can only talk when they have time but if you request mental health housing you are turned down.

8) How often are you contacted by **a mental health** practitioner? Never if you dont request it
Typically, how much time do they spend with you? 1 per month

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
To move to D-unit Mental Health - Let me out now Either is OK with me.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Need a lawyer who is honest and looking out for my rights then no need for mental health.

Please provide any additional comments below:

Additional Comments regarding segregation status: 99% of the problem is having a secure living & working situation, with supervision. And then programs while in GP to help people learn how to live with each other in non-violence. LCC basically reinforces violence by sending people who fight to the Hole for only 3 days. Then the person who won the fight stays in GP while the person who lost goes to PC. Instead they should press charges where they can. Put the violent inmates in Seg (Hole) while letting the PC people in GP. And as soon as you use violence to solve a problem then you lose privileges or go to the Hole. Then you would see a drop in mental health related issues - less pills - less people in Seg. and less demand for Mental Health housing.

All inmates should go through programming which would help them make better non-violent, non-confrontational decisions. Social skills and learning to live in society - communication skills in general needs to be stressed.

Or if you keep things the way they are people will keep coming back to prison because all they have learned is to get what you want by being violent!

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: They aren't spose to retaliate to grievances but they do. They've stole from me, called me horrible names and try to break me every day.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
protective custody

4) How many times have you been on segregation status? [redacted] once

5) Overall, approximately how long have you been on segregation status? [redacted] 2-3 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
–

7) What **mental health treatments** are available to you when on segregation status?
None, I've asked several times to see a counselor and haven't gotten a response.

8) How often are you contacted by **a mental health** practitioner? Never
Typically, how much time do they spend with you? –

9) What **programs** are available to you in segregation status?
None except school if you are eligable.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Drug & Alcohol treatment & Sex offender treatment.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
To return to society I need to take the sex offender treatment. General pop not an option because of extortion, rape, and assault because of my charges.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Sex offender treatment, Counseling, Drug & Alcohol treatment.

Please provide any additional comments below:

Additional Comments regarding segregation status:

There are no programs, no jobs available for us. We are locked in our cells 22 hrs a day, Staff are disrespectful to us, some are prejudicial even.

Honestly, there aren't enough words to describe what it's like here. Barely get any s&n, no activities or such. Gp gets yard almost all day, they get weight lifting, handball, tennis, etc. We have nothing because we are p.c. What S.E. really needs is a prison just for sex offenders so we don't have to worry about getting raped, extorted, assaulted and have to "pay rent" to walk around on the yard.

No one parole's sex offenders, even first timers, and that's ridiculous. We are over capacity, there's barely enough room for anyone. Something needs to be done. You can't truely know how bad it is unless you spend just a little time in here.

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? x YES, _____ NO.

Comments: I have noticed that several of the PC unit staff do, or say things, that are deliberately provacotive to anger inmates which causes situations like Jenkins anger towards society buty the rest of prison staff are fairly respectful and actually helpful towards me atleast.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
July 17th, I left protective custody and in LCC general population with no problems.

4) How many times have you been on segregation status? 3 times

5) Overall, approximately how long have you been on segregation status? 20+ years

6) During this stay, or your most recent stay in segregation status, how long were you held?
16 years

7) What **mental health treatments** are available to you when on segregation status?
The only mental health available to P.C. is seeing the Mental health persons when they come around to ask questions, or grant you a pass to the office for their reviews, or at your request.

8) How often are you contacted by **a mental health** practitioner? 3-4 months only.
Typically, how much time do they spend with you? 3 to 5 minuts generally.

9) What **programs** are available to you in segregation status?
NONE other than G.E.D class. So anyone of us with a ~~gek~~ G.E.D have no programs on P.C.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? NONE.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
More time spent with the doctors instead of being rushed depending on individual needs. More [illegible]
Being able to take part in group therapy or indivbidual therapy with an actual Psychologist.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Personally, I don't need anything, but I refer you to the last question.

Please provide any additional comments below:

Additional Comments regarding segregation status:

Some staff, especially Unit case worker McCord of "A" unit p.c. should NOT be allowed to work with segregated inmates because he does thing deliberately to antagonize inmates in a passive agressive manner. Such as if an inmate requests to get into his cell from showers, McCord will leave the pantry control box, go do rounds and when he gets to that inmates room, will ask the inmate why he's out of the cel,l. Or, if you are trying to use the restroom will come and stare at you, thus having earned the name "Peter Gazer" by inmates, and he has haD SEXUALY HARRASED INMATES VERBALLY, or made deliberate rude remarks about their cell stinking . This is unprofessional, deliberate harassment of inmates and should not be tolerated.
Compaliantss have been filed but nothing is ever done about this situation, McCord is on several "Hit lists" when certain inmates get out of prison. Another situation happened when Staff Jeff Laub provoked inmate patric Howley, and Laub was severaly shanked by inmate Howley over tyhe same type of situations as above.

Lastly, If you had more oppertunities for inmates on segregated status such as College, or technical school trades, and not having to be locked into an 7x9 cell 20 hours a day, especially on P.C. you may be better off and have less incidences like Jenkins and the above examples. P.C. has a hard time being locked down all the time Thanks to Betty Gergen makeing the rules on P.C. and getting the prison warden to endorce those.

I know you have hard decisions to make and I sincerely hope that this has been of some help to you. Thank you for your time and attention, GOD bless, and good luck.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, ✓ NO.

Comments: No I do not think that the treatment I receive is fair at all because the administrators pick & chose who their gonna let out of seg, you could be in seg with another inmate for the same thing but because he's in D-unit (Mental Health unit) they let him out but keep you in. So No im not treated fair at all.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Disciplinary segregation, which I've been on for the past Ten months.

4) How many times have you been on segregation status? Twice in 3 years.

5) Overall, approximately how long have you been on segregation status? as of right now Ten mont

6) During this stay, or your most recent stay in segregation status, how long were you held?
Ten months as of now I still have four more months left.

7) What **mental health treatments** are available to you when on segregation status?
Their are No mental Health treatment programs available to us in LCC or in segregation unless your in the mental Health (unit) which is D-unit.

8) How often are you contacted by **a mental health** practitioner? every 60 days
Typically, how much time do they spend with you? 20 TO 30 minutes

9) What **programs** are available to you in segregation status?
NONE

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? anger management

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Coping skills on how to deal with Depression which is caused from being in segregation to long, as well as anger management skills.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Coping skills, anger managements skills, communication skills.

Please provide any additional comments below:

Additional Comments regarding segregation status: I think there needs to be some type of changes to the way we receive mental Health treatment because its impossible for inmates in segregation as well as in general population to receive proper mental Health treatment when their is only one mental health worker for the whole segregation units as well as for general population (its the same one person for seven housing units) so its impossible for us to receive proper treatment or to be seen as much as we should be because of the above reasons. I also think their needs to be some type of mental Health programs given to us in segregation to help us deal with anger as well as with depression from being in segregation so long. & I think they need to hire more mental Health staff for segregation as well as for general population they have more mental Health staff here for the (sex offenders & D-unit) then they do for general population which I dont think is right because they dont need that many workers in one unit.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
Kim. Cal Printed name: Kelsey Candler 73585

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, ____ NO.

Comments: I don't think its right that they took me to the hospital from SCG and I got my stare in the hospital and when they brought me to Lec they lost about 14 dollars werth of stuff from my Property

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)

4) How many times have you been on segregation status? Can't rembumber

5) Overall, approximately how long have you been on segregation status? 2 or 3 Years

6) During this stay, or your most recent stay in segregation status, how long were you held?
14 days

7) What **mental health treatments** are available to you when on segregation status?

8) How often are you contacted by **a mental health** practitioner? not very often
Typically, how much time do they spend with you? very little time

9) What **programs** are available to you in segregation status?

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Drug & Alcohol class is refered

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
none

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Please provide any additional comments below:

Additional Comments regarding segregation status: I Don't want to be helped here because they lost my stuff coming from the hospital to lcc and I wrote a kite asking what happend or if property knows what happend to my stuff and still havent got a kite back from them.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: I say yes but I as a person have to seek out what help is offered and that is limited in segration

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
I went from genral population to LCCS menal Health unit

4) How many times have you been on segregation status? 2 times

5) Overall, approximately how long have you been on segregation status? 10 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
for 7 days Disaplinary segration

7) What **mental health treatments** are available to you when on segregation status?
none if little only on call phic doctor have to make appointments first or be suicidal or disstress to see someone perfessional

8) How often are you contacted by **a mental health** practitioner? every day I'm on a menal Health unit
Typically, how much time do they spend with you? One season a week

9) What **programs** are available to you in segregation status?
none

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? ~~[illegible]~~ very limited in ~~[illegible]~~ I currently have access to counslers and case workers nurse and a therapest during day time hrs. little help is offered segration

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
access to a counsler or therepest mental health readings on per[redacted]dition and tonls [redacted]slers

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Seasons with a theripist/counsler homework on my problems hand outs for stress relief and more availibility to mental health personal

Please provide any additional comments below:

Additional Comments regarding segregation status: I am currently on D unit in LCC mental Health unit I started in Genral population I am supervised or have as much access to case workers in the evening and day working theripest during the day although I only meet once a week with the theripest I have access to programs that are here but I have to sighn up for wich ones may suit me in segration I did not have access to none off this no counsler no theripest to talk to in distressing times they were called about the situation I found that only on call nurses were limited to how much help the could offer as it wasnt ther pefession as a mental Health perfessional. in segragation I would normally have to deal with my crissis on my own or wait 24hrs to a work day my kite was recieved to get help or an answer or to deal with my crissis by then could have gotten worse or intense or just delayed untill I could talk about my issue I was seeing a theripest phic doctor once a week in CCC before coming to LCC D unit my crissis or problems lead me to be transfered here I deal with PTSD Anxiety Bipolar scizotypo problems everyday so at this time I am only at the begaining stages to recieve programs or help that I'll need and itall wont be

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

able to do much but see there is a concern to deal with problem areas I have I wont get to get far

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
S. Clemans Printed name: S. Clemans

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments:

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protectiody

4) How many times have you been on segregation status? 4

5) Overall, approximately how long have you been on segregation status? 4 1/2 Years

6) During this stay, or your most recent stay in segregation status, how long were you held?
9 Months

7) What **mental health treatments** are available to you when on segregation status?
Psychiatrist visit

8) How often are you contacted by **a mental health** practitioner? 4-5 times a month
Typically, how much time do they spend with you? 5-10 min

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level?

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
AA/Anger management

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

AA

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: For the most part, most of the staff is Helpful & Understanding but there are those who could care less and treat you like just a numbered inmate that they need to account for.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody, Treatment Program

4) How many times have you been on segregation status? Once

5) Overall, approximately how long have you been on segregation status? ~~Two~~ Six Months

6) During this stay, or your most recent stay in segregation status, how long were you held?
6 Weeks

7) What **mental health treatments** are available to you when on segregation status?
Not sure, I never asked because I felt it didn't matter.

8) How often are you contacted by **a mental health** practitioner? Never
Typically, how much time do they spend with you? —

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? All programs were unavailable during Segregation.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I think the Healthy Living could be Helpful if approached properly and Not Judgementally.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I believe there needs to be More Concentration on Rehabilita and less on Just doing the Time.

Please provide any additional comments below:

Additional Comments regarding segregation status: Staff needs to be Fair with Everyone and Not just Favorites. Situations needs to be taken Seriously and Not Ignored. Proper care should be given to All Health Issues and Accidents/Incidents that happen and I Don't feel this is happening now.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: As P.C. inmates we are discriminated against. Staff treat us as lesser inmates and we get very little mental Health and NO SELF-betterment programming.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody

4) How many times have you been on segregation status? P.C. is segregation status and i've been on P.C. for 7 years.

5) Overall, approximately how long have you been on segregation status? 7 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
7 years

7) What **mental health treatments** are available to you when on segregation status?
I have Not had any Mental Health treatment for almost a year, However" i take Mental Health medication

8) How often are you contacted by **a mental health** practitioner? Almost Never
Typically, how much time do they spend with you? 2 Minutes

9) What **programs** are available to you in segregation status?
There are No programs for P.C. inmates at whatsoever and P.C. is made up mostly of Child Molesters who jam their time with NO programming.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Anger management, Domestic Violence, Drug treatment. But as i said," there is NO programming in the L.C.C P.C. Unit.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
First of all they could stop makeN us sleep on the floor in segregation We sleep on plastic tubs that are only 3 or 4 inches off the floo Second, any Mental Health would be better than the neglect we are getting now.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anger mangment, Domestic Violence, Parenting Education, Mental Health classes and Trade classes like welding or Auto Body.

Please provide any additional comments below:

Additional Comments regarding segregation status:

In the P.C. Unit at L.C.C we are locked down for 22½ hours a day with no access to programming. And we are locked down for 22½ hours a day with a roommate in a cell that is far smaller than State and Federal Laws allow for to men to live in for that amount of time.

As i said before" inmates in the L.C.C control Unit and C-Unit segregation are forced to sleep on plastic tub that are worn out and only 3 or 4 inches off the floor. L.C.C is the only prison in the NDCS that uses the dog beds in segregation. They were supposed to be temporary about 20 years ago but they serve as extra punishment and to dehumanize segregation inmates. This type of treatment is bad for an inmates Mental Health.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If so[redacted]acility helped you fill out this form [redacted] sign here [redacted] Printed name: [redacted] self

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: There are over 125 inmates in PC here and the only program which is barely available is GED.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protectave ~~Cousto~~ Custody

4) How many times have you been on segregation status? 1 I/S pending P.C

5) Overall, approximately how long have you been on segregation status? almost a year

6) During this stay, or your most recent stay in segregation status, how long were you held?
~~0~~ 2½ months

7) What **mental health treatments** are available to you when on segregation status?
none

8) How often are you contacted by **a mental health** practitioner? every 90 days to 180 days
Typically, how much time do they spend with you? 30-45 min

9) What **programs** are available to you in segregation status?
GED to those wno it may be aplicable

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Out Patient drug treatment

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
regular therapy session's and closer attinton to medical issuance

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

[redacted] finance class [redacted] ont get any help for prepareing for re-entery to society.

Please provide any additional comments below:

Additional Comments regarding segregation status:

in PC here the unit staff almost refuse to do anything to get you prepared for or even suggest things such as parole, work release, the return of good time when earned. They do not answer Kites with any sort of action, only a "pass the buck" method with no results. For instance I am eledgable for parole December 15 2014, all my inpatient program needs have been fulfilled as of October 2013 I have a place to go, employment, and suport system, and I have been asking them to submit a request of a review/hearing, and they ignore me or tell me I dont meet requirements, with out even consulting my file to see what can be done. My only program need as of now is Out Patient Drug Treatment which I can fufill on parole, but any time I or anyone else ask's for any kind of help no matter what the issue is, the answer is always "I Dont Know" or I'll get back to you, and they never get back to you. In One instance I was denied a attorney call the day before court simply because the Case manager Ms. Gurgen didnt think I needed to talk to my lawer. Point being, No we dont have any programing, staff is incapeable of aiding us we are locked down 22 hours a day here in Protective Coustody. Please Help US, No one else will.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: We have a couple staff members that antaganiz inmates

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody

4) How many times have you been on segregation status? 4 or 5

5) Overall, approximately how long have you been on segregation status? 8 ½ yrs

6) During this stay, or your most recent stay in segregation status, how long were you held?
8 ½ yrs

7) What **mental health treatments** are available to you when on segregation status?
mental health talks to you + medication + phsyciatrist.

8) How often are you contacted by **a mental health** practitioner? 1 month
Typically, how much time do they spend with you? ½ hr.

9) What **programs** are available to you in segregation status?
the only program is ged. We are not aloud any other programing

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Drug treatment but we are not allowed to have that program

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I don't know

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Drug treatment, mental health.,

Please provide any additional comments below:

Additional Comments regarding segregation status:

We are allowed no kind of programing while we are in PC.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: Medical don't seem to care about diabetic and getting them over for physicals or treatment. They do it on their own time not when it's to be done.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
protective custody

4) How many times have you been on segregation status? Since 2001

5) Overall, approximately how long have you been on segregation status? 13 year

6) During this stay, or your most recent stay in segregation status, how long were you held?
_____

7) What **mental health treatments** are available to you when on segregation status?
None at this time. Well they come once every 3 month to check on us or if we need to talk we need to write a kite otherwise no treatment.

8) How often are you contacted by **a mental health** practitioner? Every 3 months
Typically, how much time do they spend with you? 3 to 5 mins.

9) What **programs** are available to you in segregation status?
GED class which I've already completed.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Sex offender treatment.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Sexoffender treatment, Anger management or

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Reentry program. Such where to go for housing, clothes food stamps heath issues.

Please provide any additional comments below:

Additional Comments regarding segregation status:

We are always having some type of problems with medical or Eye clinic or Dental
It seems to take a long time to get over to the Eye clinic.
There is no programming back here at all but GED classes. No jobs
So alot of inmate are having a hard time Plus were locked down in
cells that were designed for one person but there are two per cell.
We only get 1hr yard time. 45mn dayroom in the afternoon the rest were
locked down.
There are those who would like to do the sexoffender program but are told
they have to wait until their within ~~three~~ two years of their T.R.D. (Release date)
before they can do the program. Some sit back here ~~another~~ ~~year~~ with nothing
to do until then I've been in prison 15 years I've gotten my GED.
I'm now a Teacher Aide helping others get their GED. I've completed
Level 1 & 2 of what was Mental Health (GOLF) before it was cancelled,
And I've completed Level one of Drug & Alcohol N.R.T.S. Other than this
I've turned my life over to God and have done several Bible Correspondence Courses,
But other than that I'm doing nothing but sitting here waiting to do my treatment.
I've got ten years left. I don't understand why Mental Health or the prison
come up with some type of a plan for treatment. Why can't they have a treatment
facility just for sex offender that way they could receive treatment the
whole time their doing their sentence instead of doing it all in two years
then having to house many after their to get out due to not completing
their treatments.
You may contact me if you need more information.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form. [redacted] age 57 Nonviolent Christi

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: Dr Lukin Psychologist Danielle Bauer MH Practitioner D Unit Treatment Team kicked me off D Unit for doing my Habeas corpus they call a symptom of my mental illness

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
P.C. due to loud snoring GP inmates threats I am 57 Iatrogenic hypothyroidism Bipolar schizo affective disorder

4) How many times have you been on segregation status? 7/8/00 to 9/15±/00 9/5/01–9/20/01 10/12/01 – Spring 04 7/28/14–8/21/14 PC 8/21/14 →

5) Overall, approximately how long have you been on segregation status? see 4 above

6) During this stay, or your most recent stay in segregation status, how long were you held?
7/28/14 – 8/21/14 refused to lock down GP Refused B-2 GP Cell

7) What **mental health treatments** are available to you when on segregation status?
Saw Ted Hill once briefly 7/29/14 + 7/31/14? Dr Lukin was supposed to send a pass to talk about his testimony 5/19/14 he said I "did not kill with malice aforethought" 1/2/91 2d degree murder Repeated.

8) How often are you contacted by **a mental health** practitioner? I must request to be seen
Typically, how much time do they spend with you? half hour

9) What **programs** are available to you in segregation status?
None due to my poverty $10.00 unfrozen per month to July Payscore August 2014 Balance $6.07 Indigent Sept No typewriter for legal work since April 2014 Computer law library thru Unit

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Mental Health Programming D Unit For Parole eligibility Repeated malice 28-402 (1)(1925) State v Hall 24 Neb 376 (1996) Judicial Executive Amendments Repeated law

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Not just DEC/LCC Sleep Apnea Study but actual Sleep lab study why do I [redacted] GP inmates threaten me with assault in my sleep top bunk Should prevail discharge Habeas Corpus 2014/2015 life sentence Repeated malice DON'T WANT to be killed/[illegible]

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[redacted]

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

To be given my Rx Geodon the way it was intended instead of pulling apart capsules spilling medicine it was designed to disperse in intestines not powder in my stomach

Please provide any additional comments below:

Stop stigmatizing past mental illness saying I could kill again

Additional Comments regarding segregation status: continue above NDCS Pharmacy inconsistently = green lines my Geodon so Sgt/PC staff pull it apart spill it dump it in water in a medicine cup so I do not get full dose as prescribed by Dr M Wetzel Psychiatrist LCC NDCS anyone having medically induced hypothyroidism who had myxedema madness frank psychosis who cares about sanity will take all their Rx medicine fight for it if need be I do not sell medicine use street drugs or alcohol I attend AA Club in GP I have NO intent to use alcohol again when on Rx medicine I have now for hypothyroidism Bipolar schizo affective disorder I am not stupid my legal knowledge gained since 1992 in prison has continued to grow LCC mental health likes to say my Christian/legal beliefs are only symptom of my mental illness see Smart v State 48 III App 38 (1975) Repealed Cons False imprisonment money damage case on point I do not like LCC NDCS denying photocopies for my legal Habeas Corpus litigation unless I prepay costs @ $10.00 times per month Forced involuntary servitude GP inmate state you expect me to obey law when NSCF Trial Courts Neb Attny Gen use Repealed 2d degree murder malice 28-402 (1975) 1/2/91 death certificate Repealed 1873 Involuntary Intent manslaughter w/o malice sudden quarrel w/o justification or excuse

OPTIONAL: Name [redacted] INMATE NUMBER [redacted] mentally ill

see State v Scroggie 110 Idaho 103 (1986) repeal McNaghten Test 1/2/1991 or either unintentional sudden quarrel w/o justification/excuse

Repealed 1873 No crime 1/2/1991 State v Allen, Doc 32 Page 150

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? __X__ YES, _____ NO.

Comments: I do ~~believe~~ believe that there can be more treatment Orriented programs in PC for inmates who want + need it.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
protective Costody

4) How many times have you been on segregation status? 0

5) Overall, approximately how long have you been on segregation status? 5 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
Still on P.C.

7) What **mental health treatments** are available to you when on segregation status?
We can go see mental health but there is no on the unit treatment there are time Mental health Comes and asks if everything is OK. were the Treatm

8) How often are you contacted by **a mental health** practitioner? Maybe once a month
Typically, how much time do they spend with you? 5 to 10 minnuts

9) What **programs** are available to you in segregation status?
Ged, No other programs they did have a self ment Class otherwise nothing general pop has more ~~opt~~ options.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Sex offender programing and Complete the program. (otherside for suggestions)

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I can go to g.p. when I chose I stay back in pc. Because if things get ~~[illegible]~~ off it our fault [redacted] and the penatentry [redacted] replace it. if the penatentry would work a little harder at watching and looking for stolen items maybe being in general pop wouldn't be so bad.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

any sex offender programing, anger stress, golf. Hell any type of treatment will help us better our lifes in all ways but the state will

Please provide any additional comments below: Pay the employees Big Money for realy not doing a dam thing How about some money on more treatment for inmates

Additional Comments regarding segregation status:

You know there are 3 types of sex offender Classes that C-Sort offers I-Help — O-help — & B-help now why Cant inmates that are in P.C. or segregation that are sex offenders like myself And have alot of time untill they get out of prison do the B-help (Book help) program. We can get the book, get assignments from some one in mental health do the assignments give the book back to Mental health they Can Correct it and when they give the books back to us inmates along with the next assignment.

Pluss the jobs inmates have help with responsibility how about an asentive those who do a good job after a year get a rais untill they reach a $3.78 or just raise the pay from 121 to 225, 225 to 378, + The highest pay you can come up with I have realized in the 12 plus years I have been down There has never been a increase in inmate Pay but if you want us to get ready for the out side where we will get pay raises why not help us learn to earn our raises as well? + it would also bring back College Corses so we will know what we need when we

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

Do get out A lot of people need to learn new traits or other things to be a better worker at there jobs. Thank You

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: Several Case Workers, Eg. C.W Lance McCord are verbally, emotionally and mentally abusive to inmates, yet because McCord denies any alligation: his behavior is not questioned because he always works alone on the unit.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Involuntary Protective Custody - 3yrs - custody level IX

4) How many times have you been on segregation status? 8 times over 15 years

5) Overall, approximately how long have you been on segregation status? 3 plus years this time

6) During this stay, or your most recent stay in segregation status, how long were you held?
3 plus years

7) What **mental health treatments** are available to you when on segregation status?
Medication, pills, medication, pills, medication, pills, 5min talk, 2nd grade word search, Kindergarten color books

8) How often are you contacted by **a mental health** practitioner? After the 15th time of being asked what I had for breakfast, I told M.H. to stop asking me stupid ques. Typically, how much time do they spend with you? 3 min. Finally, I had to threaten a law suite for them to stop asking me what date it was.

9) What **programs** are available to you in segregation status?
3 library books per week, 1hr yard per day, 45 min day room per day

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I do not have an individual plan until I'm 2 years to my parole date, 5 years from now. So I'm not allowed any programing for 10 years.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Actual sex offender groups - out patient classes - as offered at O.C.C. - N.S.P, and work release.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Access to the prison Library - at this time P.C. is not allowed to go to the library to check out book, we use a 8 year old listing to request books each week.

Please provide any additional comments below:

Additional Comments regarding segregation status: Life is made exceedingly difficult in P.C. by Case Worker Lance McCord. The abuse this man puts inmates through is criminal. But since other staff refuse to work with him, and will not report his action - due to fear of their jobs - C.W. McCord is allowed to use his authority to inflict ever changing hell onto inmates. No amount of Grievance, Ombudsman reports, State Patrol reports affects this staff abuse. All CW McCord has to do is "Deny all alligations", and the complaint is closed. To date this case worker has written 8 misconduct reports against me. One clearly violated N.D.O.C. rules, one couldn't even be processed because I didn't violate rules, 4 were in direct conflict with Unit Manager Housing rules. In 2012 CW McCord wrote over 300 misconduct reports, but he only works avg. 260 days. LB 1199 allows inmates to earn good time by being M.R. free. CW McCord abuses this idea with flagrant and numerous M.R.s. I have grievances toward McCord with ∅ results.

My point in this is

1) N.D.O.C. pleces abusive staff into Segrigation, so as to hide the abuse, and to allow these staff free reign to punish inmates

2) Over 3 years ago, an inmate cut up a staff on this unit because he felt abused, and had no other recourse. The inmate acted wrong, but the point is the same.

3) Segrigation Staff, especially McCord, should be held accountable to the hundreds of complaints against them.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

I have sealed this envelope, and written over the flap

Sealed

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: Lack proper managment for programming needed to parole, unwillingness to help with getting to programming.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody

4) How many times have you been on segregation status? Several

5) Overall, approximately how long have you been on segregation status? 2-3 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
4 years

7) What **mental health treatments** are available to you when on segregation status?
Routine check-ups, otherwise you have to be psychotic to get any attention.

8) How often are you contacted by **a mental health** practitioner? Twice a year
Typically, how much time do they spend with you? 2 minutes

9) What **programs** are available to you in segregation status?
One that they've only done twice, Crime victims Impact class. Other than that, none.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Alternatives to Violence, Non residential treatment/SAU.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Dealing with drug addiction, alchohol abuse, life planning

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anger Managment, Job skills.

Please provide any additional comments below:

Additional Comments regarding segregation status: Our P.C. Unit is ridiculous, Case workers are next to impossible to work with, the medical treatment is almost non-exsistant unless you have a limb detached it seems like. On P.C. we are a Segregated unit, some are put back here, some chose to be back here, yet we are treated like we did something wrong. We only get one hour a day outside recreation time with very limited access to physical activity. Our case managment team procrastinates when it comes time for an inmate to go to work release, lower security institution, or parole. The way staff interacts with inmates is very inapropriate, we are talked to as though we are children and not adults. This type of treatment leads to temper flares and argumentative attitudes that are met with threats of misconduct reports that prevent some inmates access to early release. A certain Case worker in general, Lance McCord is the main Culprit of these accusations. He is argumentative to the point of sheer ire. He tries to force religion on you even after you tell him not to, then he'll come back later and bring up the topic again. He'll also come to the shower and open the door while occupied to tell you your time is up and then stays to argue while you are nude and in the Shower. Among other things these are most prevalent. Honestly I think this unit needs to be monitored for the benefit of the inmates well being. Thankyou.

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: In PC were treated poorly Certain Staff is not proper for a rehabilitive environment. Were ~~pressured~~ provoked.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
protective custody

4) How many times have you been on segregation status? 1 time

5) Overall, approximately how long have you been on segregation status? 3 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
—

7) What **mental health treatments** are available to you when on segregation status?
Not exactly sure. They come by and ask questions. Thats all I've ever seen them do

8) How often are you contacted by **a mental health** practitioner? every 3 months aprox.
Typically, how much time do they spend with you? 1-2 mins

9) What **programs** are available to you in segregation status?
None. They have offered ~~an~~ crime Victim Impact Class but only twice.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Non-Residential Drug Treatment / SAU.
Anger Management, Crime Victim Impact, basically as many as I can take

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Mentally Im good.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Drug Treatment, Anger Management, Crime Victim impact; any other ones were allowed to take

Please provide any additional comments below:

Additional Comments regarding segregation status:

As an inmate in PC we're treated as the bottom of the barrell. The caseworkers we have are a joke. They provoke people into write ups. Try to force religion saying their beliefs are the only right ones. CW McLord in PC on numerous ocasions has walked in on me in the shower yet he still has a job. Numerous people have filed sexual harrassment charges yet nothing happens when it comes to our caseworker getting us out or to another prison they lie or do nothing at all. we have no weights, resistance bands, medicine balls, nothing to take our stress out on. We're treated as if we are in the hole. Some choose to come back here others were forced yet we suffer like we got in trouble. We get 1 hour outside, The same as being in Segergation yet were in P.C. There is plenty more time we could be allowed outside. We're not allowed to go the the gym, only our "yard" which is extremely small. How can we be treated like this when we are back here in PC to stay out of trouble?

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, X NO.

Comments: Need more people that are licenced AND theropist

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)

_____

4) How many times have you been on segregation status? _____

5) Overall, approximately how long have you been on segregation status? 4 1/2 months

6) During this stay, or your most recent stay in segregation status, how long were you held? Still Here.

7) What **mental health treatments** are available to you when on segregation status? talking to kerri Paulsen At L.C.C.

8) How often are you contacted by **a mental health** practitioner? Never - You Got to contact the Typically, how much time do they spend with you? 45 min to hour

9) What **programs** are available to you in segregation status? [redacted] NONE [redacted]

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison? I had to violate my parole to Seek [redacted] mental Health [redacted]

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Help set thing up for Society

Please provide any additional comments below:

Additional Comments regarding segregation status: I asked for mental Health before I paroled, while I was on Parole And Never recieved it. Thats why Ive Contacted The A.C.L.U.

Its pretty Bad that I had to violate my parole to seek mental Health. I give you written Consent to Contact the Nebraska STATE Ombudsmans Office Jeral Moreland Because its all Documented there their Office about this matter

And If you wish to Contact me About this matter please fill free to do so.

[redacted]

[redacted]

Lincoln, Ne 68542-2800

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: not professional enough for me

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Intensive

4) How many times have you been on segregation status? 1

5) Overall, approximately how long have you been on segregation status? _____

6) During this stay, or your most recent stay in segregation status, how long were you held?
6

7) What **mental health treatments** are available to you when on segregation status?
Little to None

8) How often are you contacted by **a mental health** practitioner? _____
Typically, how much time do they spend with you? _____

9) What **programs** are available to you in segregation status?
Dont Know

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
For them to listen instead of what they thought they heard

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

have not been there long enough yet

Please provide any additional comments below:

Additional Comments regarding segregation status:

When placed on status they went with one side instead of finding out the whole truth

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
[redacted] Printed name: [redacted] — another inmate

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: The way the staff speak to you/others is inappropriate. They neglect to bring your clothing items & envelopes right away. When toilet tissue are needed they take their time.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Displinary Seg

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 120 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
14 days

7) What **mental health treatments** are available to you when on segregation status?
You are asked if you want to speak to mental health if you's gonna be down there over 30 days. And if you are on suicide watch

8) How often are you contacted by **a mental health** practitioner? Once a Month
Typically, how much time do they spend with you? Less than an hour

9) What **programs** are available to you in segregation status?
School

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Mood management, Anger Management and Jail

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Give more Counciling time and to give the proper needed medication

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anger Management, [redacted] transitional Housing, Drug & Alcohol Treatment, Church Services, [redacted]ily Phone Calling and a dual diagnosis program

Please provide any additional comments below:

Additional Comments regarding segregation status: The food is not enough down there if they'd let you order Canteen (food items) and lotion Right away or while on D.S. it would be helpful. The water is gross. Its extremely Cold & they won't give out extra blankets. Unless its an bleeding emergency the medical treatment is very poor. The staff responses to inmates are at their descretion. Rec daily over on Saturday and Sunday. Church Services on Sunday.

In the Seg packets they need to give out lotion

Thank you for your time.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: I was treated fine and those around me were too.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable; (For example, protective custody, intensive management, etc.)
protective Custody, back in population

4) How many times have you been on segregation status? 1x in five years

5) Overall, approximately how long have you been on segregation status? I stayed overnight

6) During this stay, or your most recent stay in segregation status, how long were you held?
overnight

7) What **mental health treatments** are available to you when on segregation status?
None were available

8) How often are you contacted by **a mental health** practitioner? when med expire
Typically, how much time do they spend with you? 15 to 20 minutes

9) What **programs** are available to you in segregation status?
None.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? My personalize plan is complete

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
To help me to get over verbal abuse cause ~~may~~ by my roommate, this is what sent me to protective custody

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

How to handle violent treatment from other.

Please provide any additional comments below:

Additional Comments regarding segregation status:

I've been in NCCW for about 4 1/2 years and was given a violent roomate. I'm 63 years old when the lady became threatening I ask to be P C, I didn't know it had changed and you had to do 30 days seg. to get to PC.

I lost my job at CSI and was re-hired in 24 hours, I lost my time on the job and had to start all over. I lost my vacation time and sick leave. Just from trying to protect my self.

After I went to seg. my roomate attack the girl across the hall, stomping her in the face, breaking her glasses, she had foot-prints on her back and body. She had to stay in seg untill NCCW Risk Mgmt investigation was completed. She work where I work and lost her time on the job and had to start over also.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
DS + AC

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? My entire time in prison 2 mos

6) During this stay, or your most recent stay in segregation status, how long were you held?
49 days

7) What **mental health treatments** are available to you when on segregation status?
I have access to treatment that helps my anxiety and PTSD

8) How often are you contacted by **a mental health** practitioner? weekly
Typically, how much time do they spend with you? 30 mins a week

9) What **programs** are available to you in segregation status?
None at this time but reading books from the library, walking, and the law library

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Parenting

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
To remain on my meds and continue counseling

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

parenting and some schooling and A work program

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, Ø NO.

Comments: I never saw anyone Regarding mental health while I was down there and I kite for mental Health everyday.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
general population

4) How many times have you been on segregation status? 1

5) Overall, approximately how long have you been on segregation status? 7 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
7 days

7) What **mental health treatments** are available to you when on segregation status?
None. They ask if I want to be seen by medical but when ask to see mental the say something about some 1177.

8) How often are you contacted by **a mental health** practitioner? Ø
Typically, how much time do they spend with you? Ø

9) What **programs** are available to you in segregation status?
Ø

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Angel management
it is not available at NCCW

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Anger Management

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

OASIS, Anger management

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: I BELIEVE I WAS NOT PROVIDED THE MENTAL HEALTH CA THAT I NEED. I FEEL MY DEPRESSION WAS NOT MET AND I STAR TO LOSE MYSELF, LOSE HOPE, ETC.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
DISPLANARY SEGREGATION

4) How many times have you been on segregation status? 2 TIMES

5) Overall, approximately how long have you been on segregation status? 12 DAYS

6) During this stay, or your most recent stay in segregation status, how long were you held?
7 DAYS

7) What **mental health treatments** are available to you when on segregation status?
NONE

8) How often are you contacted by **a mental health** practitioner? I NEVER SEEN OR WAS CONTAC BY MENTAL HEALTH
Typically, how much time do they spend with you? NONE

9) What **programs** are available to you in segregation status?
NONE

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? RESIDENTIAL TREATMENT.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
BEING ABLE TO SEE & SIT DOWN W/ A MENTAL HEALTH DOCTOR ONCE A WEEK. BEING PROVIDED EXERCISES BY MENTAL THAT I COULD DO DOWN IN SEG, SO MY MIND COULD BE OCCUPIE ON SOMETHING OTHER THAN THINKING IN MY OWN MINDS.

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

LIKE A PROGRAM TO SEE IF I AM EVEN CREDIABLE ENOUGH TO LEAVE PRISON AND BE BACK IN SOCIETY. ANY PROGRAM THAT WOULD PREPARE ME TO BE RELEASED INTO SOCIETY.

Please provide any additional comments below:

Additional Comments regarding segregation status:

HAVING NO SOCIAL CONTACT W/ ANOTHER INMATE OR STAFF CAN MAKE A PERSON GO CRAZY. JUST BEING PASSED A MEAL TRAY + ASKED IF YOU NEED KITES IS NOT ENOUGH CONTACT TO KEEP A HUMAN [redacted] SANE. EVEN THOUGH I WAS ONLY IN SEGREGATION FOR A WEEK I FELT LIKE I COULD HAVE LOST MY SANITY. I COULD NEVER IMAGINE DOING MONTHS OR YEARS IN SEG AND NOT COMING OUT CRAZY, [redacted] HAVING SOCIAL PROBLEMS, OR BEING ABLE TO DEAL W/ MY EMOTIONS IN A POSITIVE MANNER.

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: Staff has become careless and/or lazy. We are not treated like human ADULTS, we are constantly overlooked, ignored, &/or yelled a

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
IS, depending on status of investigation for an assault on me by anott inmate; Lakrecia Donnell.

4) How many times have you been on segregation status? 3, this year.

5) Overall, approximately how long have you been on segregation status? I am no longer in SEG My longest stay was in 2012, for 5 months straight.

6) During this stay, or your most recent stay in segregation status, how long were you held?
7 days, pending investigation.

7) What **mental health treatments** are available to you when on segregation status?
None. We are able to speak to Ms. Donavan for a very short "therapy" session, but that's it.

8) How often are you contacted by **a mental health** practitioner? By doctor prescribing meds - once every 1-3 months; a therap MAYBE once a W
Typically, how much time do they spend with you? from 10 mins. to about 1 hour max.

9) What **programs** are available to you in segregation status?
NONE.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? In Seg I am unable to attend any classes or programs. I have no access to mood or Anger management in this facility at all.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Therapy - counseling atleast once / twice week, workbooks for mental health / anger issues; journals to journal emotions.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anger / mood management, GED completion, bigger "walk" areas, 7 Habits Class

Please provide any additional comments below:

Additional Comments regarding segregation status: I feel that when in SEG we should be allowed to attend classes or programs, seperate ~~for~~ from GP, of course. I also feel that I'm at a higher stress level when I can ONLY shower 3 times PER WEEK and am only given a weeks worth of hygiene items too. I believe we should be ALLOWED to have our hygiene supplies that we purchased BEFORE going to SEG, because many of us live on State Pay and cannot afford to RE-PURCHASE hygiene items that we need during our SEG hold.

I also feel that inmates with a ~~continuous~~ continuous pattern of going to SEG, getting out of SEG, and going back after a short period should have to complete extensive mental health management BEFORE being released BACK TO GP.

Many inmates go in & out of SEG very often and their issues & the CORE of their "problem" isn't being addressed or "worked on."

OPTIONAL: Name [redacted] MATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: Staff are constantly Screaming at us, wont help us when we need it, treat some inmates way better then others.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Disciplinary segregation the Administrative confinement

4) How many times have you been on segregation status? Several - at least 10.

5) Overall, approximately how long have you been on segregation status? 3 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
1 Month

7) What **mental health treatments** are available to you when on segregation status?
None only psych meds that are allready perscribed, we got No Counsling, classes absolutly no mental Health treatment in Seg.

8) How often are you contacted by **a mental health** practitioner? every 3 months
Typically, how much time do they spend with you? 20 mins

9) What **programs** are available to you in segregation status?
None.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? SAU (Substance abuse treatment)
Anger & Mood Management (on my plan still even tho the classes are No longer available at the women's prison)

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Anger management, thinking skills, Couseling to work thru past abuse or any other Ma[redacted] issues)

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I allready answered this on Question 11.

Please provide any additional comments below:

Additional Comments regarding segregation status:

Seg staff dont do their checks every 30 mins like they are supposed to they forge the sheet where they record the checks at so it matches the time they were supposed to do them. Sometimes when we are out of toilet paper or sanitary pads we have to wait hours for staff to bring us some cuz they are too "busy" they get an attitude when we need something. inmates verbally abuse each-oth in seg and staff hear it and dont do any thing about it. Also if we have any medical problems or are sick while in seg they dont notify medical or medical will tell us they'll see us but then dont. They tell us we're fakeing it or go lay down And wont answer the emergency button.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: While in Segregation I was egged on and treated inhumane

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Displinary Segregation

4) How many times have you been on segregation status? 10

5) Overall, approximately how long have you been on segregation status? 9yrs

6) During this stay, or your most recent stay in segregation status, how long were you held?
1yr

7) What **mental health treatments** are available to you when on segregation status?
None just medication

8) How often are you contacted by **a mental health** practitioner? 0
Typically, how much time do they spend with you? 0

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Anger Management, Mood Management

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Relaxation technique, therapy about anger

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anger classes, Self help books, therapy

Please provide any additional comments below:

Additional Comments regarding segregation status: While I was in Segregation I had mental problems due to me not having proper medication I was very violent to myself and others in a way to protect themselfs staff would put me on a come-a-long put me in the middle and have both males and females watch as they made me strip naked. Other times they would come in with a shield knock me down cut my clothes off and have 2 males pull my naked thighs apart and a nurse would perform a cavity search on me I do not understand why the men were included on these events except to dehumanize me I have done 7 yrs in segregation at one time due to the things staff did to me I will never be the same I was five pointed for days naked, And I have to see these guards who traumatized me, And see them smile in my face The Rules need to be changed doing this to inmates isnt helping it makes us hate guards.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

Idiot

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
I.S.

4) How many times have you been on segregation status? Once on I.S/once on P.C.

5) Overall, approximately how long have you been on segregation status? 23days on P.C. 8days on I.S.

6) During this stay, or your most recent stay in segregation status, how long were you held?
8 days

7) What **mental health treatments** are available to you when on segregation status?
I dont Know

8) How often are you contacted by **a mental health** practitioner? 0
Typically, how much time do they spend with you? _____

9) What **programs** are available to you in segregation status?
The level status

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? S.A.U.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Counseling

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: most people get special treatments.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)

none

4) How many times have you been on segregation status? 3 x's

5) Overall, approximately how long have you been on segregation status? 1 month

6) During this stay, or your most recent stay in segregation status, how long were you held? 15 days

7) What **mental health treatments** are available to you when on segregation status?

counsling.

8) How often are you contacted by **a mental health** practitioner? have to fill out kite. Typically, how much time do they spend with you? 15 min.

9) What **programs** are available to you in segregation status?

~~[illegible]~~ School.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? all but school

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?

Anything more than more than what they have. postive social interaction.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

my ~~job~~ more job training.

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: Lisa K Sexton

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, R NO.

Comments: Some of the staff are nice but for the most part they are very demeaning & disrespectful. They feel its their job to punish us.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
I'm out Now but I was IS

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 3 weeks

6) During this stay, or your most recent stay in segregation status, how long were you held?
1 week

7) What **mental health treatments** are available to you when on segregation status?
None that I am aware of.

8) How often are you contacted by **a mental health** practitioner? None
Typically, how much time do they spend with you? N/A

9) What **programs** are available to you in segregation status?
None that was made aware to me.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? IOP Intensive Outpatient - Not available here - most women do Nothing here but lay around.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Maybe some one on one

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I don't know but something would be helpful.

Please provide any additional comments below:

Additional Comments regarding segregation status:

Most women have No or already completed and do nothing but sit around. What programs are available are limited to size of class. (10-12ppl.) and are once every few months. The women go home to take care of the kids but w/out any education, vocational or anything else then they just return to crime to take care of the bills.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: there Attitude is very ~~unperfectionally~~ ~~unperfectionally~~ unperfectionally

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
[redacted] DS

4) How many times have you been on segregation status? 4 to 5 times

5) Overall, approximately how long have you been on segregation status? 1 Year plus 40 days this time

6) During this stay, or your most recent stay in segregation status, how long were you held?
1 Year and 6 months

7) What **mental health treatments** are available to you when on segregation status?
talking to ms. Donavan for 15 to 20 mins ms. Donavan is one of the mental health Lady

8) How often are you contacted by **a mental health** practitioner? every two weeks
Typically, how much time do they spend with you? 15 mins

9) What **programs** are available to you in segregation status?
walk 1 hour

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Radio on level 2D TV only on AC

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
drug treatment health treatment

[redacted] [redacted]

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Please provide any additional comments below:

Additional Comments regarding segregation status:

by mental health meeting with me more often even when Im in GP I feel that I would Stay on the right track because, talking and geting things off my chest and talking about changeing my self into a better person make me feel good inSide because I want to better my self I Just don't Know were to Start Ive lived my life Scareing And I could have Die because, I lived a deadly road but by god he saved my life by bringing me here to help my self And get the help I need here but I don't have the help I need here these mental health people are not not giveing me my tools I need so there for I think Something needs to be done about this thank you!

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: mental health and the nurses around here are rude an inpatient with us.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
DS and level 2 or per'se going on 2 weeks

4) How many times have you been on segregation status? more than 5 times

5) Overall, approximately how long have you been on segregation status? 5 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
2 weeks

7) What **mental health treatments** are available to you when on segregation status?
to me none. I try long ago but they have refused me.

8) How often are you contacted by **a mental health** practitioner? NONE
Typically, how much time do they spend with you? None

9) What **programs** are available to you in segregation status?
None to me. Only if your enrolled in school they bring your books but other than that none.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? ?

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
To me, atleast have session you know. Face to Face conversation an be more appropriate.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Well see Im not a people person and Im not really social. So whatever will help I'll take.

Please provide any additional comments below:

Additional Comments regarding segregation status:

I have personal issues so the way that mental health work. I just try to work on my problem on my own. With mental Healths rejecting me on help. I jus stay away from staff much as possible so there for its up to you guys to figure out the rest. I do believe if the staff was more [redacted] One way than I think it would be alot better.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: They do their job.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Disciplinary Segregation

4) How many times have you been on segregation status? 2 times

5) Overall, approximately how long have you been on segregation status? 8 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
2 months

7) What **mental health treatments** are available to you when on segregation status?
I can kyte and ask to talk to a mental health professional.

8) How often are you contacted by **a mental health** practitioner? once a week
Typically, how much time do they spend with you? 15 minutes

9) What **programs** are available to you in segregation status?
We can clean our cell, shower, "walk" outside and we can have the book cart.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Mood management and anger management.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
No mental health treatment.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

No programs would be helpful. Maybe SAU drug treatment.

Please provide any additional comments below:

Additional Comments regarding segregation status: [illegible]

The staff here are polite, respectful and professional.

Thank you for giving me a chance to share.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: Staff are very overworked always working double shifts they often lose patience with us. Inmates who are black receive longer sep time then white inmates staff is very unfair

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
IS pending Involuntary PC

4) How many times have you been on segregation status? 3

5) Overall, approximately how long have you been on segregation status? 20 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
8 days

7) What **mental health treatments** are available to you when on segregation status?
None I have kited mental health daily another inmate tried to bully me into being with her I have night tremors and flashbacks and get no help

8) How often are you contacted by **a mental health** practitioner? None
Typically, how much time do they spend with you? None

9) What **programs** are available to you in segregation status?
NONE

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Substance Abuse Unit

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Rape Victims class Mood & Anger Management It would be helpful to have people [redacted] 3 hours a day before they fully returned to Gp

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Cognitive thinking, Anger management, parenting classes And incentive program that allowed property for good inmates

Please provide any additional comments below:

Additional Comments regarding segregation status:

While on segregation status does mental health and ability to process there feelings decrease they are not able to process thoughts as well many times when I have told staff members how I feel they say don't feel that way I ~~have~~ mental health drop and recive the response that I am scheduled to see someone they never come the only way to get staff attention is to freak out than they call mental heath or run in with there gorilla squad I am back here personally ON a PREA investigation than I will be involuntary R.ed Becuse I came forward I have been placed in segration I have recived no counseling no medical health treatment nothing to help me at all I am the victim but I am treated like the preactor I have to be shackled up to go to shower to medical to visiting while the person who abused me runs free in general population able to victimize others Please consider not making victims of crime be treated the same way as the preactor just think in society if I raped you and you reported it and they put you in jail how would that help the matter?? NCCW Needs help!!

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, ____ NO.

Comments: Sometimes as humans, some staff takes out their bad day or attitudes towards inmates.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective custody

4) How many times have you been on segregation status? 5/6

5) Overall, approximately how long have you been on segregation status? 2 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
3 mths

7) What **mental health treatments** are available to you when on segregation status?
Protective Custody — NONE other than taking the medication for my depression - anxiety - insomia

8) How often are you contacted by **a mental health** practitioner? every 3/4 mths if that
Typically, how much time do they spend with you? 8/10 minutes to discuss medication intaking

9) What **programs** are available to you in segregation status?
NONE protective custody

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? NONE

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
One on one counseling to discuss my fears and how i can deal with them more than 1 hr to walk in general [redacted] 20 minutes to shower a day other than that PC is only allowed out their room 1 1/2 hrs a d[illegible] excluding Sat/Sun. we should be treated as if were human beings not [illegible]

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Better or rather Counseling to talk through issues, instead of being quick to put inmates on medications.

Please provide any additional comments below:

Additional Comments regarding segregation status:

NO Comment

I've been incarserated for 10 years and things are ONLY getting worse Not better for inmates. NO programs to get us ready for society NO counseling. But rather staff is quick to put you in Stg for the smallest things!

How is that reforming us?

Medical department is A JOKE
thats why i have a lawsuit pending due to negligence.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: postponing court by staff - leads to additional time in SEG/RHU also puts canteen orders in ~~jeop~~ jeporday. Example: SEG status order due to court postponing.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
most recent was IS or immediate segregation

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 20 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
11 days

7) What **mental health treatments** are available to you when on segregation status?
my medication. However, response time to get back in to see the prescriber is ridiculous.

8) How often are you contacted by **a mental health** practitioner? 1
Typically, how much time do they spend with you? _____

9) What **programs** are available to you in segregation status?
NONE. No programs. You can go walk in an area fenced off - similar to a dog kennel.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? school and star - while I was in RHU or SEG. Neither were available.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
to have my meds monitored and handled professionally. On segregation status or ANY status. Inmates need their medications.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Counseling or just being able to speak to my prescriber. Medications are being left with no follow-ups for inmates.

Please provide any additional comments below: Remand problems. I came back from a remand and they didn't even have my meds?

Additional Comments regarding segregation status:

In some respects I like the intelligence levels in SEG or RHU. Alot of reading material is available. I actually had gotten sprayed with "mase" or "OC". And I was already cuffed and detained by another officer when I was sprayed by Lt. Forgey. Then I went to RHU.

While I was in RHU I read the Temple Mount Code. Interesting how we declassify or give clearance to security sensitive issues.

There's a lot of sensitive issues that are "chatted" about in RHU. Some of the women cry, some yell, some withdraw, some freak out - and to me, I wish I could heal them all but I don't even know how to heal myself. I know that a few will begin to sing while in seg and that feels healing. They sound angelic. But that's the inmates. This prison overall is a mess. Seriously. I am thrilled the Legislature cares enough to be doing this. You guys are AWESOME!! Thank you.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, ✓ NO.

Comments: Yes some people like Ms Bicknase and the Cpl's are fair and professional but some of the mental health and Medic personal are rude very rude

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Right Now I am on Administrative Confinement, prior to AC I was on DS for 45 days

4) How many times have you been on segregation status? Twice

5) Overall, approximately how long have you been on segregation status? 7 Months

6) During this stay, or your most recent stay in segregation status, how long were you held?
September will be my 7TH month I came to SSG in February

7) What **mental health treatments** are available to you when on segregation status?
I do not know I have never been contacted by a mental heath person since I've been down here. I know other people go see a therapist every week but it was never offered to me.

8) How often are you contacted by **a mental health** practitioner? I have never been contact
Typically, how much time do they spend with you? _____ In the 6½ months I've been in SS

9) What **programs** are available to you in segregation status?
I don't believe there are any programs. No one has ever came to my doo and offered any type of programs.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I have SAU on my personalised plan but while in SSG you ca go into the SAU program. I am on the waiting list but have to get out SSG First.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I think people should be evaluated if they ask for it. I've many people ask for mental health while their down here [redacted] are denied. It took months just for the doctor to see me. I had to kite them and ask them.

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I think Anger Management would help

Please provide any additional comments below:

Additional Comments regarding segregation status: In the 6½ month that I have bee in S&G I have never been offered no type of Mental Heal- treatment. Before I came to S&G, I had sent Mental Health 11R to ask to be seen. Telling them I needed medication for my bipolar and Anger. I came to Prison in January was in D&E for 30 days while in D&E I came to S&G for 7 days DS. But when I first got here I told Mental Health I needed help I came back to S&G in February and been down here ever since but it took months before I was even seen by a doctor.

I've witnessed other people treated rudely, unprofessional and unfair by Mental Health and Medical Personal. When we ask to go to Medical cuz some things wrong like an emergency it takes all day sometimes they just say "Send a kite" when people ask to see Mental Health they say Send a kite. The only way to really get Medical and Mental Health down to S&G is if you threaten to harm yourself. I've watched it happen Twice in the last month

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: Staff in particular can be very useless when you need answered any questions you have

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Protective Custody

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 13 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
13 months + some odd days

7) What **mental health treatments** are available to you when on segregation status?
I believe you can speak with a counselor if need be 1-2 times a week

8) How often are you contacted by **a mental health** practitioner? 1 time
Typically, how much time do they spend with you? 2-3 minutes

9) What **programs** are available to you in segregation status?
None

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? None

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
What would be helpful to me would be to leave here + never come back to this hell hole.

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

There really isn't much for programs to do here, going to church for a bible study would be nice but we don't get that.

Please provide any additional comments below:

Additional Comments regarding segregation status:

Any comments wouldn't matter anyway

OPTIONAL: Name _____ INMATE NUMBER _____

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ____ YES, X NO.

Comments: I was recently assualted and staff just watched it. I feel certain staff like seeing stuff like this

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
8.17.14 (IS) due 2 an investigation

4) How many times have you been on segregation status? Numerous

5) Overall, approximately how long have you been on segregation status? about 4x a year

6) During this stay, or your most recent stay in segregation status, how long were you held?
72 hours

7) What **mental health treatments** are available to you when on segregation status?
you can meet w/ a therapist once a week. They just recently started this!

8) How often are you contacted by **a mental health** practitioner? not often - in GP
Typically, how much time do they spend with you? if meeting w/ one in RHU about an 1 hour

9) What **programs** are available to you in segregation status?
NONE

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Anger Management / Mood Management

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I'm not sure but there needs to be something because I've been incarcerated 10 yrs & I'm scared to [redacted] here.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

DDK

Please provide any additional comments below:

Additional Comments regarding segregation status: I feel like the segregation unit is used 4 purposes other than what they are meant for. I've been here 10yrs & I've been in RHU for unnecessary reasons. Staff here get tired of dealing w/ inmates like me that NEED help and shove us in the Seg unit. I'm not saying that I didn't deserve to be there for my actions but sometimes it was because they didn't want to deal with me.

For example: On 8.17.14 I was assaulted and didn't fight back 3 staff witnessed it and I was still placed on IS because of my record! This place is backwards. And I do need help.

Thank You Very Much for your time

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
IS and DS minimum A custody

4) How many times have you been on segregation status? 1 once

5) Overall, approximately how long have you been on segregation status? 7 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
7 days

7) What **mental health treatments** are available to you when on segregation status?
Any mental health you need you get.

8) How often are you contacted by **a mental health** practitioner? 1 time a month
Typically, how much time do they spend with you? how ever long you need

9) What **programs** are available to you in segregation status?
None. I think we should have Programs that help People who go to seg alot like Anger managment.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I would like to have collage classes or other classes we dont have like collencing Arts.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
N-A

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I think anger management for others.

Please provide any additional comments below:

Additional Comments regarding segregation status: I feel we should have more classes. not only in Seg but in our Prison. im 20 and I have my diploma and would like to take collage class or a class that is like in other Prisons. Nebraska dose'nt have any classes. Doing time is hard if you sit and do nothing thats why inmates get bord and want to fight. I think if we had classes that inmates would take there would be less fights and an easer time. I went to seg because this inmate keep picking on me stalking me. calling my son racist names. So I told staff I want to be moved. nothing happend. so I was finally sick of it after 6 months of this bully I went to a staff member and told him my feelings whitch were "threats" so I went to Seg. I am still in the same unit with her and its still happening. so thats why I think we should have more programe in seg and in our prison.

Thank you.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

   Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
   DS and IS

4) How many times have you been on segregation status? about 10

5) Overall, approximately how long have you been on segregation status? _____

6) During this stay, or your most recent stay in segregation status, how long were you held?
   9 days

7) What **mental health treatments** are available to you when on segregation status?
   None

8) How often are you contacted by **a mental health** practitioner? None
   Typically, how much time do they spend with you? None

9) What **programs** are available to you in segregation status?
   none

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? none

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
   anger management some type attitude class

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

same as ?11 answer

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name _____ INMATE NUMBER _____

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here Penny Rae Khan Printed name: Penny Rae Khan

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, ____ NO.

Comments: ____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
desagated Segagation

4) How many times have you been on segregation status? 2

5) Overall, approximately how long have you been on segregation status? 14 days

6) During this stay, or your most recent stay in segregation status, how long were you held?
7 days

7) What **mental health treatments** are available to you when on segregation status?
NONE

8) How often are you contacted by **a mental health** practitioner? NONE
Typically, how much time do they spend with you? 0

9) What **programs** are available to you in segregation status?
None but books to read

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I was not allowed into SAU Program until I was cleared medically from Seg

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Just seeing a mental Health practioner.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I'm not sure.

Please provide any additional comments below:

Additional Comments regarding segregation status:

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, NO (NO)

Comments: They Don't Help In Any Thing Instead To give They Take It Away.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
A.C.-A4-Level

4) How many times have you been on segregation status? 5 Times In 8 years.

5) Overall, approximately how long have you been on segregation status? I Have been most of my Time in segregation, About six years out of 8 years.

6) During this stay, or your most recent stay in segregation status, how long were you held?
The most 26 months and The Less 6 months and In beTwean.

7) What **mental health treatments** are available to you when on segregation status?
None, we Are Geting Damage mental and Emotional, been Lock up. 23/7 for months and years.

8) How often are you contacted by **a mental health** practitioner? once a month.
Typically, how much time do they spend with you? As Long as They want.

9) What **programs** are available to you in segregation status?
One The Transformation project. But It Doesn't Help US To Get out of segregation.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I been recomended To Do G.E.D School. V.R.P Violent Reduction program, But I can Not because we Can't Get or Do Programs In segregation.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Any Program would be good for us In Here As long it Help us To Get better and Get out To General population and out of prison.

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Drgs programs, violent programs, work programs That Help us To Learn Differents Jobs.

Please provide any additional comments below:

Additional Comments regarding segregation status: In segregation we need work out equipment In Every Mini yard, Art supply, water colors, Drawing papers, so we Can Learn something, because we ain't Here In segregation for few days or weeks, These people Held us in Here for months and years for petty stuff. These people Don Help us. Instead They Take away our Things To The point of been Naked, some Inmates Have end up in The Hospital for These Things because we get sick of The cold in The rooms Also is Alot Descrimination agains Latinos

Here is Alot To be Done. I wish that you Came Here and Talk To The Inmate In person, Because IS Alot To be say and for you To know. And Help us. Don't TALK TO The Inmates That The Guardian offer you. You Choose The Inmates.

Thank you for This opportunity that you Give us To express our self. Of The Things That Are wrong In Here.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? ✓ YES, _____ NO.

Comments: As with any situation where one group is in total power over another there are degrees of fair, professional, & appropriate.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Intensive Management

4) How many times have you been on segregation status? more than 8, less than 12.

5) Overall, approximately how long have you been on segregation status? 18 months

6) During this stay, or your most recent stay in segregation status, how long were you held?
18 months so far

7) What **mental health treatments** are available to you when on segregation status?
There's something but I don't really know what.

8) How often are you contacted by **a mental health** practitioner? once every few months
Typically, how much time do they spend with you? a few minutes

9) What **programs** are available to you in segregation status?
It depends on what is defined as a program. The incentive program is only for those that can't control their behavior & have people that send them money for canteen items.

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? Being I'm doing mandatory sentences there is incentive for me to participate in any programs here.

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
None

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

None, most people on seg status are here for long periods to fill beds so that the whole prison system is at capacity.

Please provide any additional comments below: There're a significant number of people in seg with serious mental health issues that have no one to send them money so they sit in these cells for months &/or years in isolation. How about fixing that. (I'm not one of them)

Additional Comments regarding segregation status:

Realistically if one has people to send them money then for alot of people seg is better than G.P. (General Population) These are serious losers &/or weak socially.

For those that have broken an institution rule, even serious ones, years of being isolated is usually unscalled for. Inmate fights seldom result in serious injury, Nor do assaults on staff. The non-sexual assaults of staff by inmates are many times the result of over-zealous staff attempting to demonstrate their 'power of the badge' by harassing them.

Here's something to seriously think about. Why does the state of Nebraska feel the need to have such large seg. units? In comparison to any state south, west, east, or N.E. the level of violence here is significantly lower. Why is Nebraska's approach so much like much bigger states where the same approach doesn't work there either. The only serious criminal activity I see in Nebraska are gang activity & sex crimes. Why? I lived in a state forty years ago with about the same population. We had non-italian robbery, burglary, & car theft rings in all major cities. Those things are rare here.

The seg unit here is used because it was built & that has to be justified by being kept full. Is it a coincidence a housing unit is kept full at a constant rate?

While I am a crook I despise all sex offenders even if it's female staff as their victems. The most recent victim is Off. Hayes violently groped, tore her pants, by inmate in seg. I.M. cell. Ask other guards & especially Nurses that pass out meds. It's being covered up due to the inmate having some kind of leverage via one of the wardens. *

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1) If someone from the facility helped you fill out this form, please have them sign here
_____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: I was treated with crule and unusual punishment April 1 2014 by having staff force me to live in a cell that had feces in it and was given blankets that had feces on them I wrote grievances but nobody is not doing anything about it

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)

_____

4) How many times have you been on segregation status? ~~once~~ Twice

5) Overall, approximately how long have you been on segregation status? about 2yrs. +

6) During this stay, or your most recent stay in segregation status, how long were you held?
about 2yrs +

7) What **mental health treatments** are available to you when on segregation status?
none, just talking thats its, people get T.Vs but this Native American cant

8) How often are you contacted by **a mental health** practitioner? I. D. K
Typically, how much time do they spend with you? not much

9) What **programs** are available to you in segregation status?
none

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? I. D. K and I don't want to do any plan
Send me to NSP drug program I need help

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
I don't want to go to general population, Sending me to a facility that provides mentalhealth [redacted] before I get [redacted] so I can get the right medication and tools... TSCI is not a healthy place for people with my mind set, especially with the criminal CIOs, staff...

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

I would like to take my G.E.D while in Segregation,

Please provide any additional comments below:

Additional Comments regarding segregation status: The Staff asked me if I would program I said no, for one they dont have programs here in segregation... for me to program I would like to get some help with my drug and alcohol ~~program~~ problems, which in the past resulted in me beating a Man to death... I did go to the N.C.T.C but I hear they have that program in N.S.P now and that is one major program that will indeed help... So far I have over one month with no M.Rs thats only because the C/Os have be leaving me alone, before they would antagonize me and when I wrote grievances in the past they would come up missing or say the C/Os did nothing wrong... I am working on getting a lawyer for the C/Os treating me with Cruel and Unusual punishment On April 1st 2014... I was sent to a Federal Medical Center after I beat a Man to death in a drunking state, but I am a disabled man and at one time received a disability check (S.S.I) and the Staff here treated me with cruel and Unusual punishment... I shouldnt be here, I should be in the mental health unit in L.C.C, either way I am going to file a lawsuit, I was also left in a cell for 3 days with the Window Completely obscured with my wrist cut the long way... I still have a scar thats still pink and that was from 4-4-14 to 4-7-14 and I let the prison staff know but they didnt do anything about it until 4-7-14 2nd shift... for treating a disabled man which is me with cruel and unusual punishment and for leaving me in a cell with my wrist cut I'm not settling for nothing under $12,000,000.00 dollars the N.D.C.S hired these kinds of people

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? X YES, _____ NO.

   Comments: _____

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
   ADMINISTRATIVE CONFINEMENT

4) How many times have you been on segregation status? 1

5) Overall, approximately how long have you been on segregation status? 10 MONTHS

6) During this stay, or your most recent stay in segregation status, how long were you held?
   10 MONTHS AND COUNTING

7) What **mental health treatments** are available to you when on segregation status?
   IF WE NEED SOMETHING FROM MENTAL HEALTH WE ARE TOLD TO WRITE A REQUEST FORM

8) How often are you contacted by **a mental health** practitioner? ONLY WHEN REQUESTED
   Typically, how much time do they spend with you? 10 -15 MINUTES

9) What **programs** are available to you in segregation status?
   TRANSFORMATION PROJECT PACKETS 1-11

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? —

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?

LR 424 Department of Correctional Services Special Investigative Committee of the Legislature

12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Please provide any additional comments below:

Additional Comments regarding segregation status:

I JUST WANT TO SAY THAT I BELIEVE THE SYSTEM IS LEAVING INMATES IN SEGREGATION FOR LONG PERIODS OF TIME FOR MINOR REASONS. I'VE SEEN INMATES WHO HAVE BEEN IN A SERIOUS SITUATION SUCH AS A FIGHT OR AN ASSAULT WITH A WEAPON AN ONLY DONE 6-8 MONTHS AND I FOR EXAMPLE HAVE NEVER BEEN IN A FIGHT IN MY TIME HERE IN PRISON OR ANY TYPE OF CONFRONTATIONS I'VE ONLY RECIEVED 4 MINOR MISCONDUCT REPORTS MY WHOLE TIME HERE AND YET I'M STILL IN THE HOLE I'VE BEEN DOWN HERE 10 MONTHS WITHOUT ANY PROBLEMS I'M ON THE HIGHEST LEVEL I CAN BE ON I'VE COMPLETED THE TRANSFORMATION PROGRAM 5 MONTHS AGO AND YET JUST THIS MONTH I WAS GIVEN ANOTHER 4 MONTHS SO NOW MY NEXT REVIEW ISN'T UNTIL DECEMBER WHICH THEN I WOULD BE DOWN HERE FOR A YEAR. WHEN I WAS SENT TO SEGREGATION I'VE ONLY BEEN IN PRISON FOR 3 MONTHS AND I NEVER RECIEVED A MISCONDUCT REPORT OR ANY TYPE OF CONSEQUENCE I WAS JUST PUT IN A CELL FOR 23 HRS A DAY AND I'VE BEEN DOWN HERE EVER SINCE I WAS SENT TO PRISON TO RECIEVE HELP BUT ALL I'VE RECIEVED WAS SEGREGATION TIME AND TO BE TRUTHFUL ALL THIS HAS DONE IS SCREW UP MY MIND THE WAY I THINK AND HOW I ACT I FEEL LIKE A CAGED ANIMAL SO I AM GLAD THAT THIS MATTER OF HOW THE SEGREGATION IS BEING USED IS UNDER INVESTIGATION.

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]

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Please complete both sides of this form.

1) If someone from the facility helped you fill out this form, please have them sign here _____ Printed name: _____

2) Do you believe the treatment by staff, mental health providers, and prison administrators toward you, and/or other inmates has been fair, professional, and appropriate? _____ YES, X NO.

Comments: RACE WAS A Big part of it.

3) What is your level of segregation status at this time, or during your most recent stay, list all applicable: (For example, protective custody, intensive management, etc.)
Administrative Confinement

4) How many times have you been on segregation status? once

5) Overall, approximately how long have you been on segregation status? almost 4 years

6) During this stay, or your most recent stay in segregation status, how long were you held?
almost 4 years still and left

7) What **mental health treatments** are available to you when on segregation status?
dont know, They Never Told me of any

8) How often are you contacted by **a mental health** practitioner? 3 months
Typically, how much time do they spend with you? 1-2 min's

9) What **programs** are available to you in segregation status?
Melcom X pack it That is it

10) What **programs** are part of your individualized plan, but are unavailable to you at your current housing level? dont know ~~That~~ either

11) When on segregation status **what mental health treatment** would be helpful for you to return to general population or to society as a whole when you leave prison?
Anger program

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12) When on segregation status what **programs** would be helpful for you to return to general population or to society as a whole when you leave prison?

Something To help With Anger and To stay alway From GAng's Like a program for drop out's. To See There's life To live when you get out of a gAng life

Please provide any additional comments below:

Additional Comments regarding segregation status: I will Like To note: When We are Taken off of General population By other Inmate's. Sometimes There No Room in Protective Custody We Seat here in SMU which is The hole for year's, when we CAn Be place To and other P.C place like N.S.P or L.C.C I Ask Because I left my GAng life Behind I wAnt To Change my Life. I've Been in a GAng for 21 year's now, and Now That I'am out of it I CAnt WAlk in No General population anywhere So my New home will Be protective Custody and I Could Be in The hole for and other 4 year's or longer. Because That's how it is here, I will SAy I haven't Been The Best Inmate I had my up's and Down's with STAff, Because of disrespect To me and other's I'Am Just hope They CAn help Someone like me who don't WAnt anything To do with gAng's anymore. I WAnt To MAke it home and Not Be one of These Inmate's who TAke These life's in There Cell. or Turn up CAZY like MAney hAve done down here in The hole. I've Ast for Them To send me To N.S.P protective Custody OR L.C.C protective Custody. Because I CAnt Be in Tecumseh protective Custody Because, I've put maney BACK There myself Now I wish I hand't done That To Them. like They SAy what goes AROund Come's AROund I Belive That Now. I Just WAnt To MAke it To my BABY girl's BACK home in CAL. So if you CAn help me in anyWAy I would Thank you. I know That you don't know me But if you could change a life AROund would you let That PASS you Bye OR do Something. All I Ask is help please. I've Been in The hole almost 4 years Now. All I am Asking is To Be PLACE in Protective Custody in N.S.P or L.C.C

OPTIONAL: Name [redacted] INMATE NUMBER [redacted]